

CITY OF



LANCASTER



ANNUAL REPORT

OF

THE MEDICAL OFFICER OF HEALTH

AND

THE CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR ENDED

31st DECEMBER, 1955

CITY OF



LANCASTER

ANNUAL REPORT


OF

THE MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDED 31st. DEC.,

1955

R. W. FARQUHAR, B.Sc. (Agri.), M.B., Ch.B., D.P.H.



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Public Health Department,
Thurnham Street,
Lancaster.

TO THE CHAIRMAN AND MEMBERS OF
THE PUBLIC HEALTH COMMITTEE

Mr. Chairman, Ladies, and Gentlemen,

I have the honour to present my Annual Report on the health services of the City during 1955.

The form of the report and the matters dealt with in its various sections are in accordance with the wishes of the Ministry of Health, and the main purpose of this preamble is to emphasise certain points which are considered worthy of special attention.

The population of the City has decreased slightly in each of the last 5 years, the mid-1955 estimate being 49,750. In 1953, 1954, and 1955 there was an excess of deaths over live births amounting in total to 134, but this only accounts for a small part of the decrease in population during this period, the difference between the 1952 and 1955 populations being 840, or 1.7%.

At the 1951 census the number of persons of pensionable age was 7,690, or 14.9% of the total population, and by mid-1955 this number is estimated to have increased to 8,060, or 16.2%. Changes in the size and age structure of the population and the trend of the marriage rate all have important bearings on future housing policy.

The mortality rate of infants under one year and also of those under four weeks of age showed an improvement on last year, but a clearer picture of the trend of infant mortality will be gained from Table 6, which gives the rates for the last eleven years. It should be borne in mind that the infant mortality in the North Western region has for many years exceeded that of more favourable regions in the South East of the country by well over 20%.

A similar long term view of maternal mortality is provided in Table 5, but in this case, the figures offer little cause for satisfaction, the average mortality between 1945-54 being approximately 75% higher than the national figure.

The increase in deaths from respiratory tuberculosis from 8 in 1954 to 20 in 1955 is not considered of real significance, although it is in marked contrast to the steady decline in mortality from tuberculosis over the decennial period, 1945-54, referred to in the body of the report.

The pattern of morbidity in the working population in the Lancaster area is well brought out by the graph of the weekly incidence of sickness over the past 3 years, and shows the effects on health of weather, holidays, and epidemics of upper respiratory infections, influenza, etc.

The introduction of whooping cough vaccine and more recently of vaccination against poliomyelitis and tuberculosis, whilst welcome as a fresh means of helping to combat these diseases, may have the unfortunate effect of detracting from the importance of diphtheria immunisation.

The increase in the number of food poisoning and dysentery cases in the City should be noted ; both these bowel infections are on the increase throughout the country. Though generally mild they can be serious in the very young, in people enfeebled by illness or old age and, so long as they are present in the general community, remain a menace to hospital authorities. The new Food Hygiene Regulations should, if they can be adequately enforced, result in a considerable improvement in the hygienic standards of persons, premises, and equipment concerned with the handling of food, but progress will depend also on the support given by public opinion to the new standards.

The health of the individual is influenced by many complex factors, physical, mental, social, and environmental, and for this reason it is difficult to prove an exact relationship between bad housing and ill-health. Although bad housing is only one of the prejudicial factors its importance is not disputed. The problems involved not only in the building of 600 new houses in the City within the next five years to allow for slum clearance and redevelopment, but also in finding a means to delay the future growth of slums by the repair and improvement of a further 6,000 mendable houses has been adequately stressed by the Chief Public Health Inspector. We must always remember that, if the total income of a family is so reduced by higher rents and additional outlay on transport to work that it materially affects the amount of money left to buy good food, then rehousing slum dwellers may result in worse instead of better health.

The large number of houses let in lodgings has also been brought to your notice as well as the fact that some of the worst living conditions are to be found in houses occupied by more than one family. To my mind not the least important of the problems associated with bad housing is the depressing effect of poor living conditions on mental health and on the happiness and morale of the family, resulting eventually in some cases in disruption of the family.

In considering the relationship between dirty air and chronic bronchitis and lung cancer it is again not possible to produce conclusive proof of direct cause and effect, because of the close association of other prejudicial factors such as overcrowding, prevalence of respiratory infections, smoking habits, occupation, and social status. Nevertheless, atmospheric pollution is undoubtedly a social evil which demands vigorous action in all areas where significant pollution occurs.

On the whole, the year 1955 can be regarded as one of modest progress.

Yours faithfully,

R. W. FARQUHAR,

Medical Officer of Health.

SECTION “ A ”

**STATISTICS AND SOCIAL CONDITIONS
OF THE AREA**

SUMMARY OF STATISTICS — 1955

Area (in acres)	5,036
Population (Registrar-General's Estimate) mid-year 1955 ...	49,750
Number of Inhabited Houses according to Rate Books ...	13,543
Rateable Value	£347,817
Sum represented by a Penny Rate	£1,352
LIVE BIRTHS	<i>Males Females Total</i>
Legitimate	344 319 663
Illegitimate	21 25 46
	<hr/>
	365 344 709
	<hr/>
Crude Birth Rate per 1,000 of the estimated population .	14.3
STILL BIRTHS	<i>Males Females Total</i>
Legitimate	10 5 15
Illegitimate	— — —
	<hr/>
	10 5 15
	<hr/>
Still Birth Rate per 1,000 total (live and still) births ...	21
	<i>Males Females Total</i>
DEATHS (Total)	398 365 763
Crude Death Rate per 1,000 of the estimated population	15.3
DEATHS FROM MATERNAL CAUSES	1
Maternal Mortality Rate per 1,000 total (live and still) births	1.38
DEATHS OF INFANTS UNDER ONE YEAR OF AGE	<i>Males Females Total</i>
Legitimate	17 4 21
Illegitimate	2 — 2
	<hr/>
	19 4 23
	<hr/>
Infant Mortality Rate per 1,000 live births	32
DEATHS OF INFANTS UNDER 4 WEEKS OF AGE	<i>Males Females Total</i>
Legitimate	8 3 11
Illegitimate	2 — 2
	<hr/>
	10 3 13
	<hr/>
Neo-Natal Mortality Rate per 1,000 live births	18
	<i>Rate per 1,000</i>
DEATHS FROM CERTAIN SPECIFIED DISEASES	<i>Deaths est. population</i>
Cancer (all forms)	102 2.05
Tuberculosis (respiratory)	20 0.40

Table 1

DEATHS IN THE CITY OF LANCASTER DURING 1955
CLASSIFIED BY CAUSE AND SEX

<i>Causes</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis, Respiratory	13	7	20
Tuberculosis, Other	1	—	1
Syphilitic Disease	—	2	2
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	—	1	1
Measles	—	—	—
Other Infective and Parasitic Diseases	1	2	3
Malignant Neoplasm, Stomach	12	13	25
Malignant Neoplasm, Lung, Bronchus	17	—	17
Malignant Neoplasm, Breast	—	3	3
Malignant Neoplasm, Uterus	—	9	9
Other Malignant and Lymphatic Neoplasms	29	17	46
Leukaemia, Aleukaemia	1	1	2
Diabetes	2	2	4
Vascular Lesions of Nervous System	39	66	105
Coronary Disease, Angina	82	47	129
Hypertension with Heart Disease	10	6	16
Other Heart Disease	63	76	139
Other Circulatory Disease	15	20	35
Influenza	3	5	8
Pneumonia	23	21	44
Bronchitis	18	9	27
Other Diseases of Respiratory System	5	3	8
Ulcer of Stomach and Duodenum	5	5	10
Gastritis, Enteritis, and Diarrhoea	2	1	3
Nephritis and Nephrosis	4	2	6
Hyperplasia of Prostate	4	—	4
Pregnancy, Childbirth, Abortion	—	1	1
Congenital Malformations	4	2	6
Other Defined and Ill-defined Diseases	31	37	68
Motor Vehicle Accidents	5	1	6
All Other Accidents	9	6	15
Suicide	—	—	—
Homicide and Operations of War	—	—	—
 TOTAL DEATHS FROM ALL CAUSES	 398	 365	 763

Table 2

DEATHS CLASSIFIED BY AGE GROUP AND LOCALITY—1955

WARD		0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65-75	75-80	80+	Total.
Castle	...	1	1	—	—	—	—	—	—	—	1	15	10	9	7	44
John o'Gaunt	...	4	—	—	—	—	—	—	—	3	—	14	20	16	17	74
Park	...	3	—	—	—	—	—	—	—	2	8	62	69	58	62	264*
Queen's	...	4	—	—	—	—	1	—	—	—	—	12	16	15	15	63
St. Anne's	...	2	—	—	—	—	1	—	—	—	—	7	6	6	8	30
Scotforth	...	3	—	—	—	—	1	—	1	7	10	21	19	18	18	98
Skerton East	...	4	1	—	—	—	—	1	—	4	2	23	22	12	16	85
Skerton West	...	2	—	—	—	—	—	1	—	2	4	17	27	27	25	105
Total	...	23	2	—	—	—	3	2	1	18	25	171	189	161	168	763

*Includes 231 deaths assigned to the City which occurred in Lancaster Moor Hospital and Bay View.

Table 3

LANCASTER VITAL STATISTICS FOR 1955 AND THE PERIOD 1950 - 1954

Mid-year	Estimated Home Population	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			
										Total		Neo-natal	
		No. Regis- tered	Rate per 1,000 pop'n	No. Regis- tered	Rate per 1,000 pop'n	No. regis- tered	Rate per 1,000 total births	No of deaths regis- tered	Rate per 1,000 total births	No. of deaths regis- tered	Rate per 1,000 Live births.	No. of deaths regis- tered	Rate per 1,000 Live births.
1955	49,750	709	*14.3	763	*15.3	15	21	1	1.38	23	32	13	18
1954	49,910	636	12.7	689	13.8	15	23	—	—	28	44	21	33
1953	50,330	744	14.8	771	15.3	22	29	3	3.92	24	32	18	24
1952	50,590	738	14.6	652	12.9	13	17	1	1.33	32	43	26	35
1951	51,220	730	14.3	643	12.6	19	25	1	1.34	28	38	21	29
1950	51,750	770	14.9	611	11.8	12	15	1	1.28	38	49	24	31
Average 5 years 1950—1954		—	14.2	—	13.3	—	22	—	1.57	—	41	—	30
Average 10 years 1945—1954		—	15.7	—	12.3	—	23.7	—	1.75	—	40	—	—

*Adjusted live birth-rate (comparability factor 1.03 = 14.7 per 1,000).

*Adjusted death-rate (comparability factor 0.98 = 15.0 per 1,000).

Table 4

COMPARATIVE STATEMENT OF VITAL STATISTICS, 1955

Birth and death-rates for England and Wales, the Administrative County of Lancaster, and 160 Great Towns and 160 Smaller Towns and Lancaster M.B. for the year 1955

(Note: Figures other than those for the Administrative County and Lancaster M.B. are provisional only and are based on the Registrar-General's Quarterly Returns).

Estimated home population mid-1955	England & Wales 44,441,000		160 Great Towns 23,179,640		160 Smaller Towns 5,845,900		Admin. County of Lancs. 2,068,000		Lancaster M.B. 49,750	
	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n	No.	Crude Rate per 1,000 home pop'n
BIRTHS										
Live births	664,711	15.0	346,461	14.9	87,191	14.9	29,765	(14.39 (14.97 (a) (0.38 (26.3 (b) (12.95 (13.21 (a)	709	(14.3 (14.7 (a) (0.30 (21.0 (b) (15.3 (15.0 (a)
Stillbirths	15,748	(0.35 (23.1 (b)	8,213	(0.35 (23.2 (b)	2,079	(0.36 (23.3 (b)	793		15	
DEATHS										
All causes	518,657	11.7	267,737	11.6	67,733	11.6	26,781		763	
Tuberculosis (all forms)	6,493	0.15	3,834	0.17	777	0.13	327	0.16	21	0.42
Respiratory	5,838	0.13	*	*	*	*	302	0.15	20	0.40
Non-respiratory	655	0.02	*	*	*	*	25	0.01	1	0.02
Cancer (all forms)	91,337	2.06	*	*	*	*	4,233	2.05	102	2.05
Lung bronchus	17,271	0.39	10,405	0.45	2,189	0.37	753	0.36	17	0.34
Other cancer	74,066	1.67	*	*	*	*	3,480	1.68	85	1.71
Maternal Mortality (total)	437	0.64 (b)	*	*	*	*	40	1.31 (b)	1	1.38 (b)
Maternal causes (ex. abortion)	369	0.54 (b)	*	*	*	*	37	1.21 (b)	1	1.38 (b)
Due to abortion	68	0.10 (b)	*	*	*	*	3	0.10 (b)	Nil	Nil
Infant Mortality	16,515	24.9 (c)	8,738	25.1 (c)	2,200	25.2 (c)	791	27 (d)	23	32 (d)
Neo-natal Mortality	11,518	17.3 (c)	*	*	*	*	570	19	13	18 (d)

(a) Adjusted rate for purposes of comparison with adjusted rate of any other area or crude rate for England and Wales.
(b) Per 1,000 total (live and still) births.
(c) Per 1,000 related live births.
(d) Per 1,000 live births.
* Not available.

COMMENTS ON VITAL STATISTICS

Population

The Registrar-General's estimate of the home population at mid-year 1955 was 49,750 as against 49,910 in 1954. Over the past five years there has been a fairly steady decline in the population of the City, which reached its maximum of 51,750 in 1950. Compared with 1950 the present population is, therefore, smaller by 2,000, or 3.9%. It will be noted (Table 3) that in each of the years 1953, 1954, and 1955, the number of deaths has exceeded the number of births.

Births

In 1955 there were 709 registered live births assigned to the City of Lancaster, representing a birth rate of 14.3 per 1,000 of the estimated population, which approximates very closely to the average rate of 14.2 over the preceding 5 years. In order to compare local with national birth and death rates, an adjustment must be made to the former to allow for differences in age and sex distribution. The adjusted live birth rate for Lancaster in 1955 was 14.7, which may be compared with the crude rate for England and Wales of 15.0. Further details and comparisons are given in Tables 3 and 4. Of the total births 46, or 6.5%, were illegitimate.

Deaths

Deaths from all causes numbered 763, compared with 689 in the previous year, the corresponding crude death rates per 1,000 population being 15.3 in 1955 and 13.8 in 1954. The rate for England and Wales in 1955 was 11.7, which may be compared with the adjusted rate for Lancaster of 15.0.

It should be remembered that total mortality in Lancashire is consistently higher than for the country as a whole.

Table 1 shows the deaths classified by cause and sex under the 36 main headings used by the Registrar-General, but the relative importance of the principal causes may be more clearly seen from the Table below :

Principal Causes of Death.	1954		1955	
	No. of Deaths	Percent. of Total	No. of Deaths	Percent. of Total
Heart and Circulatory Diseases	265	38.5	319	41.8
Vascular Lesions of the Nervous System	102	14.8	105	13.7
Cancer (including Leukaemia)	117	17.0	102	13.4
Respiratory Diseases (excluding Tuberculosis)	61	8.9	87	11.4
Violence (including motor vehicle accidents)	32	4.6	21	2.8
Diseases of the Digestive System	13	1.9	13	1.7
Diseases of the Kidney and Prostate	12	1.7	21	1.3
Tuberculosis (all forms)....	11	1.6	10	2.8
Infective Diseases (excluding Tuberculosis)	6	0.9	6	0.8
All other causes	70	10.1.	79	10.3
TOTAL	689	100.0	763	100.0

Maternal Mortality

In 1955 one death occurred under the heading of childbirth, pregnancy, and abortion, equivalent to a maternal death rate of 1.38 per 1,000 total births. Owing to the smallness of the absolute figures it is difficult to compare the resultant rate with the corresponding maternal death rates for other areas, as shown in Tables 4 and 5. Nevertheless, taking the total maternal deaths over the ten years period, 1954-1945, the average maternal death rates for Lancaster M.B., the Administrative County, and England and Wales were 1.75, 1.17, and 1.02 respectively.

Infant Mortality

The number of deaths of Lancaster children under one year of age was 23, giving an infant mortality rate for 1955 of 32 per 1,000 live births. The average infant death rate over the previous 5 years was 40 (Table 3), and the trend of infant mortality from 1945 up to the year under report is illustrated in Table 6. Comparable figures for other areas are shown in Tables 4 and 6.

Of the 23 infant deaths assigned to the City no less than 12 were classified by the Registrar-General under "other defined or ill-defined diseases" and 4 as "congenital malformations." In the table below these group classifications have been broken down as far as local records allow and are shown under various age groups from one day up to one year.

Cause	under 1 day	1—7 days	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks	1—3 months	3—6 months	6—9 months	9—12 months	Total
Pneumonia (including pneumonia of the newborn)							2	1		2	5
Bronchitis									1		1
Gastro-enteritis									1		1
Congenital malformations											
genito-urinary organs				1		1					1
hydrocephalus			1			1					1
spina bifida								1			1
circulatory system								1			1
Other defined & ill-defined											
Prematurity (unqualified)	1	5				6					6
Post-natal asphyxia and atelectasis	1	1				2					2
Haemolytic disease of newborn		1				1					1
Haemorrhagic disease of newborn		2				2					2
Septicaemia (unspecified)								1			1
	2	9	1	1		13	2	4	2	2	23

Table 5

MATERNAL MORTALITY, 1955-45.

Comparative Statement of Maternal Death Rates for Lancaster M.B., the Administrative County of Lancaster and England and Wales.

Year	Lancaster M.B.		Lancs. Admin. County		England & Wales
	No. of Maternal Deaths	Mortality per 1,000 total births	No. of Maternal Deaths	Mortality per 1,000 total births	Mortality per 1,000 total births
1955	1	1.38	40	1.31	0.64
1954	Nil	Nil	27	0.90	0.69
1953	3	3.92	39	1.26	0.75
1952	1	1.33	24	0.80	0.72
1951	1	1.34	21	0.69	0.81
1950	1	1.28	31	0.98	0.87
1949	1	1.07	32	0.97	0.98
1948	2	2.27	38	1.07	1.02
1947	1	0.94	56	1.35	1.17
1946	1	1.07	52	1.42	1.43
1945	3	4.28	73	2.32	1.79
Average Mortality 10 years, 1954-1945		1.75	—	1.17	1.02

Table 6

INFANT MORTALITY, 1955-1945.

Comparative Statement of Infant Death Rates for Lancaster M.B., the Administrative County of Lancaster and England and Wales.

Year	Lancaster M.B.		Lancs. Ad. County	England & Wales
	No. of Infant Deaths	Mortality per 1,000 live births	Mortality per 1,000 live births	Mortality per 1,00 rel. live births
1955	23	32	27	25
1954	28	44	29	25
1953	24	32	29	27
1952	32	43	30	28
1951	28	38	29	30
1950	38	49	33	30
1949	32	39	38	32
1948	24	28	40	34
1947	43	41	47	41
1946	27	40	46	43
1945	31	45	50	46
Average Mortality 10 years, 1954-1945		39.9	37.1	33.6

Neo-Natal Mortality

The 13 neo-natal deaths (infants under 4 weeks of age) were equivalent to a mortality rate of 18 per 1,000 live births, the lowest figure yet recorded for the City. The comparable rate for England and Wales was 17.3.

In contrast to the 10 deaths of older infants for which respiratory and other infections were responsible in 8 cases, the 13 deaths at ages under 4 weeks were due either to congenital malformations or diseases peculiar to early infancy. No less than 6 in the latter category were ascribed to prematurity unqualified by any other cause.

Morbidity—Weekly Incidence of Sickness

I am indebted to the Manager of the local office of the Ministry of Pensions and National Insurance for the information supplied below. Since 1953 he has supplied a weekly return of the figures of new claims to sickness benefits made by the working population in the Lancaster area. These records cover Lunesdale and part of Lancaster Rural Districts, as well as Lancaster itself. In 1955 the peak period occurred in early January, when 298 first certificates of sickness were submitted in one week. The graph overleaf shows that the trend of morbidity has followed a roughly similar pattern in each of the three years, 1953, 1954, and 1955, apart from the peak periods of sickness which are largely due to respiratory infections.

INCIDENCE OF SICKNESS — WORKING POPULATION, 1955.

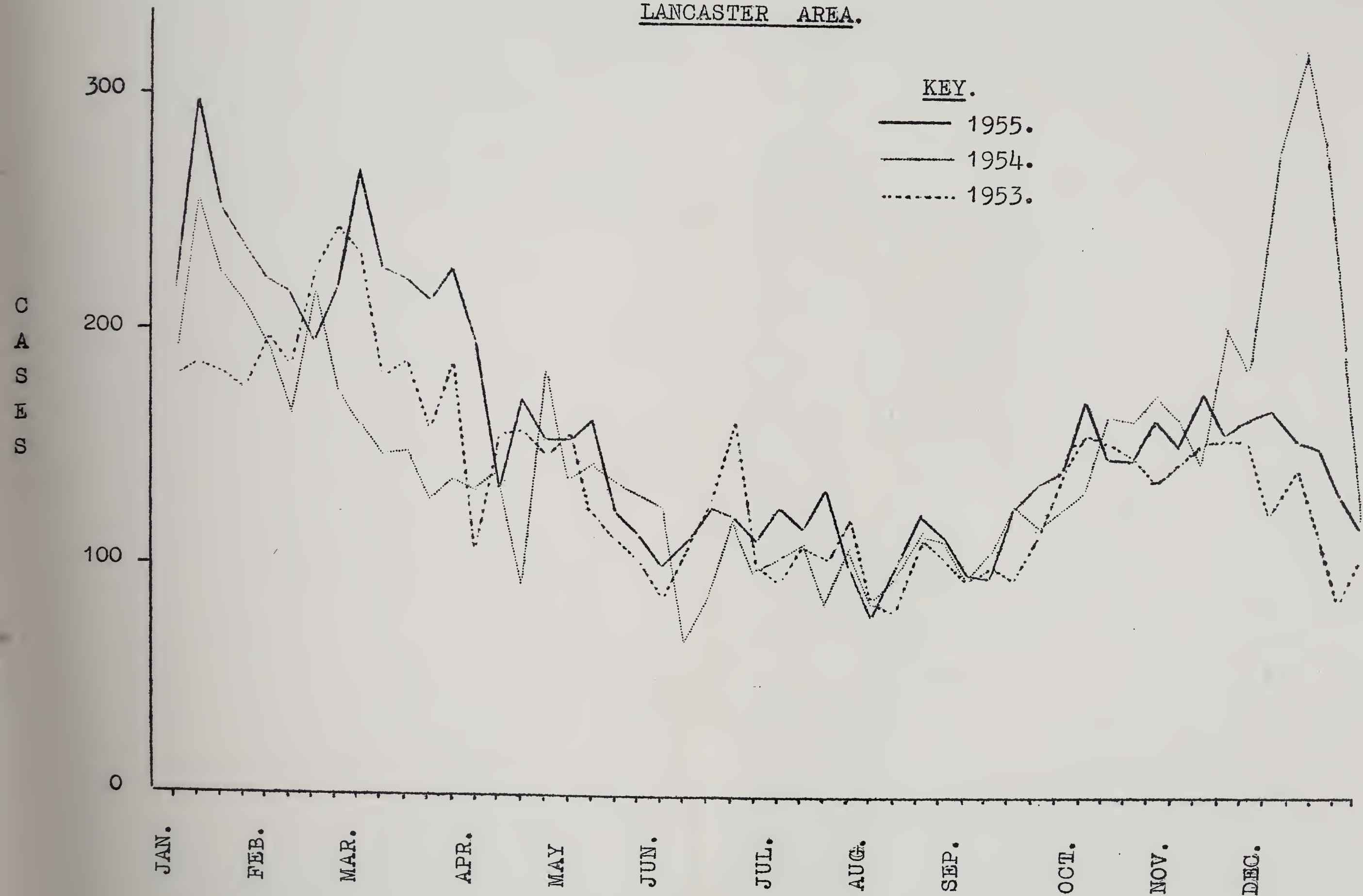
Jan.	4	228	Apr.	5	195	July	5	127	Oct.	4	171
..	11	298	..	12	133	..	12	118	..	11	148
..	18	252	..	19	170	..	19	134	..	18	148
..	25	237	..	26	154	..	26	101	..	25	163
Feb.	1	221	May	3	154	Aug.	2	79	Nov	1	153
..	8	216	..	10	162	..	9	103	..	8	175
..	15	196	..	17	125	..	16	122	..	15	158
..	22	218	..	24	115	..	23	114	..	22	164
Mar.	1	268	..	31	101	..	30	99	..	29	168
..	8	226	June	7	112	Sept.	6	96	Dec.	6	155
..	15	221	..	14	126	..	13	126	..	13	152
..	22	211	..	21	122	..	20	137	..	20	132
..	29	227	..	28	112	..	27	141	..	27	118

AVERAGE NO. OF CLAIMS PER WEEK

1953	...	140
1954	...	150
1955	...	160

WEEKLY INCIDENCE OF SICKNESS - WORKING POPULATION.

LANCASTER AREA.



SECTION “ B ”

**GENERAL PROVISION OF HEALTH
SERVICES IN THE AREA**

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

The main work of the Public Health Department concerns environmental health and the control of infectious diseases, and detailed reports on these services, which are directly controlled by the City Council, will be found in Section " C " and Section " D."

The present section is related to those health services which concern mainly the personal health and welfare of the individual rather than public health and the community. Although administered by statutory authorities other than the City Council, it is felt that some brief account of the nature and scope of these services will be of interest to the Health Committee and, indeed, to the general public.

Any account concerning the general provision of health services in the area should of necessity cover all three branches of the National Health Service. Lack of space, however, precludes more than a brief mention of two of these, namely, the General Practitioner Services and the Hospital and Specialist Services, so that this section is confined mainly to the health services provided by the Local Health Authority, i.e. by the Lancashire County Council.

Local Health Services under Part III of the National Health Service Act, 1946

Divisional Health Committee No. 2 of the Lancashire County Council are responsible for the day-to-day administration of the following health services, which are available to the citizens of Lancaster as well as to the inhabitants of the surrounding districts.

1. *Care of Expectant and Nursing Mothers and Young Children* including the provision of ante-natal clinics, post-natal care, dental care, child welfare centres and day nurseries, as well as special arrangements for premature babies, unmarried mothers, convalescent care, etc.
2. *Domiciliary Midwifery.*
3. *Health Visiting.*
4. *Home Nursing.*
5. *Home Helps.*
6. *Immunisation and Vaccination*, existing schemes afford protection to children against diphtheria, whooping cough and tetanus, whilst in the near future children, in certain age groups, will also be offered vaccination against poliomyelitis and tuberculosis.
7. *Ambulance Service.*

8. *Mental Health Service*, including community care and after-care of persons suffering from mental deficiency, as well as those suffering from mental illness.
9. *Prevention of Illness, and Care and After-Care of Persons suffering from Illness*, including health education, convalescent care, prevention and after-care of tuberculosis, provision of nursing equipment and apparatus.

Welfare Services — National Assistance Act, 1948

The following welfare services are also administered by the Divisional Health Committee :—

1. *Residential Accommodation*. For persons in need of care and attention not otherwise available to them, accommodation is provided at Bay View, Lancaster, the Empress Hostel, Morecambe, and the Hermitage, Caton.
2. *Temporary Accommodation*. In case of urgent need, e.g., eviction, temporary shelter is provided at Bay View, Lancaster, separate accommodation being provided for children.
3. *Reception Centre*. Part of the accommodation at Bay View is used for the reception of persons without a settled way of life, by arrangement between the County Council and the National Assistance Board.
4. *Handicapped Persons*. For persons who are blind, or deaf, or otherwise substantially and permanently handicapped, certain welfare provisions are made through the County Medical Officer of Health.

School Health Service — Education Act, 1944

The school health service is controlled centrally by a committee of the County Council, and for the local administration of this service the divisional medical officer is responsible to the County Medical Officer of Health.

In addition to the routine medical and dental inspections of children carried out in the City schools, various clinics, some attended by visiting specialists, are provided for the correction or treatment of certain defects.

The admission of handicapped pupils to special schools is arranged through the County Medical Officer of Health. Medical supervision of children under the care of the Children's Department is also undertaken by the school medical officers. Details relating to local clinics are set out in the table below :—

CLINIC AND TREATMENT CENTRES—LANCASTER CITY

	MON.	TUES.	WED.	THURS.	FRI.	SAT.
I ANTE-NATAL (1) Thurnham Hse.... (2) Ryelands Hse	— —	— —	— —	— 9.30-11.30 (f'tn'tly)	p.m. 2-4 (f'tn'tly)	— —
II CHILD WELFARE (1) Thurnham Hse.... (2) Ryelands Hse (3) Cong. Church Hala Est.	— 2-4 p.m. 2-4† p.m.	— — —	2-4 p.m. — —	2-4 p.m. — —	— — —	— — —
III DIPHTHERIA IMMUNISATION (1) Thurnham Hse.... (2) Ryelands Hse	} Arranged as required, usually fortnightly					
IV MINOR AILMENTS (1) Thurnham Hse.... (2) Ryelands Hse	a.m. 9-10.30 9-10.30	— —	a.m. 9-10.30 9-10.30	— —	a.m. 9-10.30 9-10.30	— —
V INSPECTION CLINIC Thurnham House	—	—	—	—	—	9.30-11.30 a.m. except first Sat'rday of month
VI OPHTHALMIC Thurnham House	9.30-12 noon by ap- p'tm't	—	—	—	—	
VII ORTHOPAEDIC Thurnham House	—	By ap- p'tm't	—	By ap- p'tm't	—	—
VIII SPEECH THERAPY Ryelands House	—	—	By ap- p'tm't	By ap- p'tm't	—	—
IX DENTAL Thurnham House	Monday to Friday, 9.30 a.m. - 4.00 p.m. daily by arrangement					

† Health Visitor only.

Laboratory Facilities

The bacteriological examination of milk, water, and ice cream is carried out by Dr. Rickards and his staff in the Department of Pathology at the Royal Lancaster Infirmary. Specimens of faeces, nose and throat swabs, blood, etc., from individual patients, and samples of suspect food are also sent to this laboratory for examination, and I am indebted to Dr. Rickards for numerous laboratory reports and much helpful advice in connection with epidemiological investigations. The chemical analysis of water, as well as of milk and foodstuffs taken under the Food and Drugs Act, 1938, is performed by the County Analyst, Dr. Walker, whose willing co-operation is also appreciated.

Maternity and Nursing Homes

The following maternity and nursing homes in Lancaster and district are registered with the County Council, under the provisions of the Public Health Act, 1936.

Westhaven Nursing Home, 2/3, Laurel Bank, Lancaster.

Beds : 8 maternity, 2 medical.

Caton Green Nursing Home, Caton Green, nr. Lancaster.

Beds : 27 medical, 5 surgical.

Co-ordination of Health Services

The structure of the National Health Service, with responsibilities shared by separate authorities, renders it essential that there should be effective arrangements for securing integration. Locally this is ensured by cross representation on committees and by liaison between officers of the different services. Co-ordination of the school health service, the other health services of the County Council and the health services administered by the City Council, is facilitated by reason of the fact that your Medical Officer of Health acts also as Divisional Medical Officer and School Medical Officer. Co-operation with local general practitioners is secured by frequent exchange of information in relation to infectious diseases, housing, domiciliary nursing services, welfare of aged and other handicapped persons, etc. There is close liaison also with all local hospitals, and I am grateful to the administrative, medical, and nursing staffs for much useful information supplied in connection with the after-care of discharged patients. Every effort is made also to co-operate with the numerous voluntary organisations, which play such a useful part in filling the gaps still apparent in the National Health Service.

SECTION “ C ”

**PREVALENCE OF AND CONTROL OVER
INFECTIOUS AND OTHER DISEASES.**

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

Prevalence

There was an increase in the number of notifications of infectious diseases (including tuberculosis)—602 this year compared with 432 in 1954. Most of this increase was caused by the greater prevalence of measles and dysentery during 1955. More detailed figures concerning the notifiable infectious diseases will be found on page 27, and tables showing the incidence of and mortality from tuberculosis are included on pages 28 and 29. The following summary shows the comparative incidence of the principal infectious diseases over the past seven years.

	1955	1954	Average of 5 years 1953 - 1949
Scarlet Fever	18	19	94
Diphtheria	—	—	—
Whooping Cough	52	133	145
Measles	337	179	460
Pneumonia	18	12	59
Tuberculosis	52	41	61
Poliomyelitis	3	8	5
Typhoid and Paratyphoid Fever	1	1	2
Dysentery	99	20	73
Food Poisoning....	13	5	39
Other Diseases	8	14	18
TOTAL	601	432	956

Measles

The expected wave of measles in 1955 brought the notifications up to 337, nearly half of them children under the age of five ; only 2 were admitted to hospital.

Whooping Cough

With 52 cases notified as against 133 in the previous year, whooping cough was much less troublesome, and none of the cases apparently required treatment in hospital. Since the efficacy of whooping cough vaccine has become acknowledged much more widely in recent years the demand for a combined vaccine, conferring a high degree of immunity against both diphtheria and whooping cough, has greatly increased.

More recently still a triple vaccine to give protection against diphtheria, whooping cough, and tetanus simultaneously has come into use, its big advantage being the great reduction in the number of injections to which a particular child has to submit.

Diphtheria

For the seventh year running no cases of diphtheria have occurred in Lancaster, and the disease has now become so rare that many parents do not realise how serious it can be nor appreciate the effects of a possible return of outbreaks of virulent diphtheria. The success of any campaign of immunisation against diphtheria depends largely upon getting as many children as possible protected at an early age, with subsequent reinforcement of acquired immunity by further injections during school life.

The table below shows the number of Lancaster children immunised during the last three years. It will be seen that as regards the two youngest age groups there has been a little improvement in 1955 but the acceptance rate for infants is still much below the desired level, and in general there has been a poor response to the continued dissemination of propaganda and the efforts of health visitors.

Immunisation is a free service, available either from the family doctor or through the school clinic, and furthermore, parents of young children now have the choice of a single, combined, or triple vaccine.

LANCASTER CITY—IMMUNISATION CARRIED OUT
1955, 1954, and 1953

Number of individuals who completed a full course of primary immunisation during the period.										Number of individuals who were given a re-inforcement injection, i.e., subsequent to complete course.				
Age at final injection										Age Group.				
0-1	1-2	2-3	3-4	4-5	Total under 5 years	5-9	10-14	Total 5-14 years	Total 15 yrs. & over	0-4	5-9	10-14	Total under 15 yrs.	Total 15 yrs & over
YEAR 1955														
234	226	48	26	12	546	40	9	49	—	44	522	425	991	4
YEAR 1954														
160	249	47	24	16	496	43	10	53	1	34	430	583	1047	73
YEAR 1953														
189	237	37	19	16	498	47	16	63	—	47	399	739	1185	9

Poliomyelitis

Three cases of poliomyelitis were notified against eight in the previous year. Two were paralytic cases, one of which made a full recovery, but the other proved fatal.

Dysentery

There was a marked increase in the incidence of dysentery with 99 cases notified, the largest number recorded since 1951. Of the total, 45 occurred in mental hospitals and 18 of these were due to the Flexner type. The remaining 54 cases occurring in general practice and including a number of children attending Ryelands Day Nursery were due to Sh. Sonnei.

Food Poisoning

Two small outbreaks in local hospitals and a number of sporadic cases in the general community brought the total notifications of food poisoning for the year up to 13, an increase of 8 over 1954.

In April, 1955, a small outbreak appeared in a general hospital, in which 5 patients developed symptoms of gastro-enteritis caused by *Salmonella typhi murium*. As a result of the immediate measures taken to prevent its spread the infection was quickly brought under control, and the Department lent its co-operation in the follow up of contacts who had been discharged to their own homes. Of the 5 cases, 3 belonged to Lancaster, and 2 to other districts, and all made a good recovery. Towards the end of April, another case, which was not admitted to hospital, was found in Lancaster Rural District, but no connection with the previous five cases was established. These 6 cases in April were preceded by a single case at the end of February in a mental hospital, and in all seven cases the causal agent was identified as *S. typhi murium*.

Between August and November 5 further cases of food poisoning, again due to *S. typhi murium*, occurred sporadically throughout the City. These individual cases appeared to be unconnected but the near relatives of two of them were employees of the same mental hospital in which the first case was discovered in February.

In November this mental hospital was again concerned in a second small but quite separate outbreak of 4 cases. Food poisoning symptoms on this occasion were due to *Salmonella Butantan*, a type not previously identified in this area. No further cases arose from these.

CASES OF INFECTIOUS DISEASE (OTHER THAN TUBERCULOSIS) NOTIFIED DURING 1955

DISEASE.	AGE PERIOD - YEARS										Total	Cases Admitted to Hospital.	Deaths
	0-1	1-3	3-5	5-10	10-15	15-25	25-45	45-65	65 & over	Age un-known			
Smallpox	—	—	—	—	—	—	—	—	—	—	18	16	—
Scarlet Fever	—	3	4	10	1	—	—	—	—	—	1	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles (excluding Rubella)	9	60	89	173	2	3	1	—	—	—	337	2	—
Whooping Cough	7	13	11	20	1	—	—	—	—	—	52	—	—
Acute Pneumonia (Primary and Influenzal)	2	1	—	1	—	1	5	3	5	—	18	2	4
Puerperal Pyrexia	—	—	—	—	—	1	3	—	—	—	4	1	—
Meningococcal Infection	1	—	—	—	—	—	—	—	—	—	1	1	—
Acute Poliomyelitis—Paralytic	—	—	1	—	—	1	—	—	—	—	2	1	1
” Non-Paralytic	—	—	—	—	—	—	1	—	—	—	1	1	—
Acute Encephalitis—Infective	—	—	—	—	—	—	—	—	—	—	—	—	—
” Post Infective	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	1	14	8	20	12	6	20	9	9	—	99	3	—
Ophthalmia Neonatorum..	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	1	—	—	2	—	3	—	—
Malaria (contracted in England and Wales)	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria (contracted abroad)	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	2	—	1	—	—	1	3	2	4	—	13	5	—
Total	22	91	114	224	16	14	34	14	20	—	549	33	5

Tuberculosis

The number of new cases of respiratory tuberculosis notified in 1955 was 43, ten more than in the previous year. This incidence was considerably lower than the average of 49.6 for the preceding ten years, and less than half the rate recorded when notification of tuberculosis first started some 40 years ago.

Notifications of non-respiratory cases increased from 8 in 1954 to 9 in 1955.

For all forms of tuberculosis, therefore, notifications amounted to 52, compared with an average of 58.7 in the preceding ten years.

Comparative figures are given below :—

Year	New Cases Notified		
	Respiratory	Non-respiratory	Total
1955	43	9	52
1954	33	8	41
1953	58	6	64
1952	48	6	54
1951	57	12	69
1950	46	9	55
1949	52	10	62
1948	66	11	77
1947	38	7	45
1946	52	9	61
1945	46	13	59
Total	496	91	587
Over 10 yrs. 1945-54	49.6	9.1	58.7

The following table gives a summary of the known cases of tuberculosis in the City as at 31st December, 1955 :—

			Males	Females	Total
Respiratory	...	...	149	105	254
Non-respiratory	...	...	21	29	50
			170	134	304

Mortality from Tuberculosis

The table below shows the number of deaths registered together with the death rates recorded during the year 1955 and the preceding decennial period.

Year	Respiratory Tuberculosis		Non-respiratory Tuberculosis		All forms	
	Deaths	Rate per 1,000 pop'n.	Deaths	Rate per 1,000 pop'n.	Deaths	Rate per 1,000 pop'n.
1955	20	0.40	1	0.02	21	0.42
1954	8	0.16	2	0.04	10	0.20
1953	7	0.14	2	0.04	9	0.18
1952	7	0.14	1	0.02	8	0.16
1951	19	0.37	1	0.02	20	0.39
1950	23	0.44	3	0.06	26	0.50
1949	14	0.27	1	0.02	15	0.29
1948	22	0.44	3	0.06	25	0.50
1947	27	0.53	2	0.04	29	0.57
1946	25	0.50	4	0.08	29	0.58
1945	17	0.36	10	0.21	27	0.57
Average of 10 years 1945-1954	16.9	0.33	2.9	0.06	19.8	0.39

It will be apparent that the 20 deaths from respiratory tuberculosis in 1955 constitute the highest number recorded since 1950, and the resultant death rate of 0.4 per 1,000 of the population exceeds the average mortality rate for the preceding ten years. The trend of the graph overleaf, however, which represents the annual number of deaths from respiratory tuberculosis, is towards an irregular but persistent decline throughout the whole period since 1915. In view of the relatively small numbers of deaths involved the rise in the mortality rate in 1955 might well be regarded as an accidental fluctuation.

There was only one death from non-respiratory tuberculosis.

In table 4 the tuberculosis mortality rate for Lancaster in 1955 can be compared with the rates for the county and for England and Wales.

Whilst local records indicate that the mortality from tuberculosis is roughly a quarter of the rate existing 40 years ago the decline in its incidence has been, here as elsewhere, at a less satisfactory rate. Such orthodox methods of prevention and control as tracing the source of infection, the supervision of contacts, and educating the public in the importance of personal hygiene and the dangers of raw milk, supplemented by the newer measures such as mass radiography and B.C.G. vaccination, are still of vital importance in checking the dissemination of the disease.

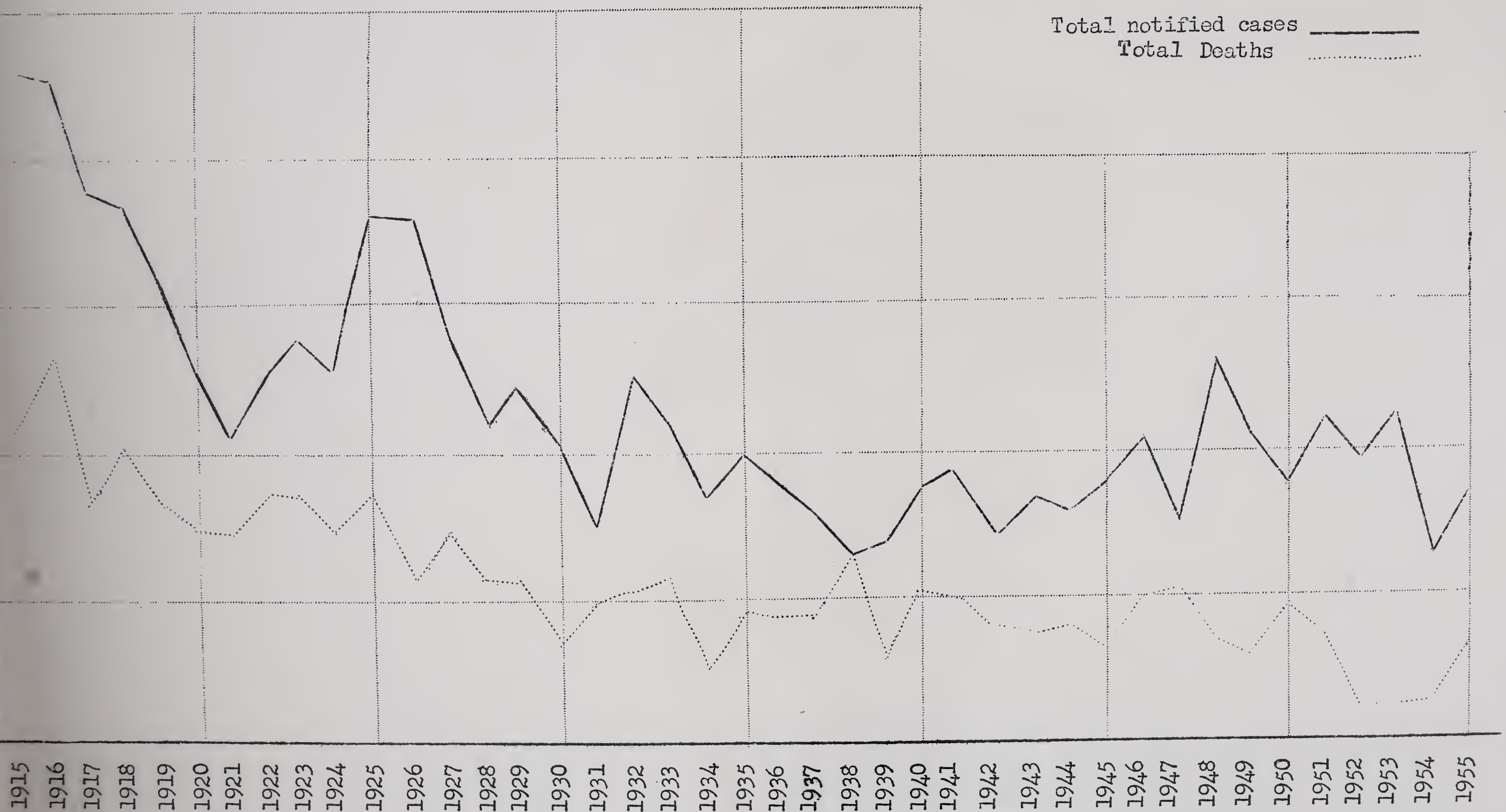
At present B.C.G. vaccination is available to certain selected groups and during the year 101 persons in Lancaster were tested for suitability for vaccination and 73 of these were subsequently vaccinated. The Medical Research Council's recent report has confirmed the value of vaccination of 13-year-old children, and local health authorities have now been encouraged to proceed with B.C.G. vaccination of school leavers. The vaccine affords valuable protection to adolescents at a time when they are most susceptible to infection.

R E S P I R A T O R Y T U B E R C U L O S I S

Notified Cases and Deaths, 1915 to 1955

K E Y

Total notified cases _____
Total Deaths



SECTION “ D ”

**SANITARY CIRCUMSTANCES
OF THE CITY**

**ANNUAL REPORT OF THE
CHIEF PUBLIC HEALTH INSPECTOR**

F. SHAW, D.P.A., M.R.S.H., A.M.I.P.H.E.

CITY OF LANCASTER—ENVIRONMENTAL HEALTH SERVICES
Under the Direction of the Chief Public Health Inspector

<p>HOUSING</p> <p>INSPECTION OF HOUSES Preparation of reports on general housing conditions in the city.</p> <p>REPAIR OF HOUSES Preparation of specifications and schedules of costs. Supervision of works. Execution of works in default of owners.</p> <p>CLEARANCE, ETC. OF UNFIT HOUSES Indication of areas needing re-planning and re-development. Clearance of the buildings from such areas. Demolition of single houses not included in areas. Closure of dwellings which it is not practicable to demolish.</p> <p>VALUATION OF HOUSES. Valuation of houses to ascertain whether they are capable of repair at reasonable cost, etc. Estimation of future life of houses</p> <p>OVERCROWDING Ascertainment and abatement of overcrowding.</p> <p>COMMON LODGING HOUSES Inspection and Registration. HOUSES LET IN LODGINGS Inspection and Supervision.</p> <p>REHOUSING Investigation into special housing needs which call for priority. Removals in connection with re-housing. Fumigation of household effects with HCN, when necessary.</p>	<p>RATS AND MICE Destruction and infestation prevention.</p> <p>INSECT, ETC., PESTS Destruction and control.</p> <p>UPHOLSTERY, ETC. FILLINGS Supervision of premises where upholstery fillings are made or stored or used. Sampling such fillings for examination as to cleanliness.</p> <p>FOOD AND DRUGS EXAMINATION AND SAMPLING</p> <p>EXAMINATION OF: Meat at time of slaughter. Meat in butchers' shops, etc. Food of all kinds in shops, stores, warehouses, etc. Supervision of the disposal of food condemned as unfit.</p> <p>SAMPLING OF: Food and Drugs for analysis. Foods for bacteriological exam.</p> <p>HYGIENE OF FOOD PREMISES, ETC. Inspection of all premises used for the preparation, storage, handling and sale of food. Advice on layout, design and construction of food premises. Advice on equipment.</p>	<p>MILK AND DAIRIES Supervision of distribution of milk Inspection of dairies.</p> <p>SAMPLING OF MILK FOR: Adulteration. Keeping quality. Tubercle bacilli. Brucella Abortus.</p> <p>PRE-LICENSING INSPECTION OF: Pasteurising plants. Sterilising plants. Bottling establishments. Routine inspection of plants and premises.</p> <p>INSPECTION OF OTHER PREMISES, e.g.:</p> <p>Factories. Building and civil engineering sites Workplaces Shops. Offices. Places of Entertainment. Offensive Trade premises. Schools.</p> <p>NATIONAL ASSISTANCE ACT Burial of the Dead. Arrangement for care of people living alone under insanitary conditions.</p> <p>ATMOSPHERIC POLLUTION Inspection of boiler, etc., plants Observations of smoke from chimneys. Investigations generally into atmospheric pollution.</p>	<p>GENERAL SANITATION Investigation into complaints. Abatement of nuisances. Water supplies, (purity and sufficiency of). Purity of swimming bath water. Inspection of camping sites. Drainage. Removals of accumulations of waste, and offensive matter.</p> <p>RIVERS AND WATERCOURSES Investigation into pollution.</p> <p>SEWAGE DISPOSAL Sewage disposal from isolated buildings not connected to the town's sewerage system.</p> <p>INFECTIOUS DISEASES Investigations into causes of spread Disinfection of premises and articles.</p> <p>FOOD-BORNE INFECTIONS Investigations into causes. Collection of specimens for exam.</p> <p>PET ANIMALS Inspection of pet animal shops.</p> <p>PORT HEALTH Inspection of crew's accommodation. Ship drinking water supplies Rat and vermin destruction Enquiries re infectious diseases and sickness amongst crews. Supervision of shellfish layings and collection grounds.</p>
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TO THE CHAIRMAN AND MEMBERS OF
THE PUBLIC HEALTH COMMITTEE

Mr. Chairman, Ladies, and Gentlemen,

If the year 1955 was, in the environmental health field, a spectacular one, it was because of the submission to Parliament of two important legislative measures. The first was a Food and Drugs Bill (now the Food and Drugs Act, 1955) and the second the Clean Air Bill (now the Clean Air Act, 1956). Under the Food and Drugs Act, 1955, Food Hygiene Regulations have been made which are the most comprehensive code of law relating to the food trades we have so far had in this country. Their enforcement will increase the work of your Public Health Inspectors for some time ahead. Conditions in the Market Hall and Church Street Market continue to give cause for concern.

The appointed day when the Clean Air Act is to come into operation has not yet been fixed, but this legislative measure will also increase the work of the Department. In the meanwhile, the degree of atmospheric pollution in the City is continuing to be recorded, and other measures taken in this field.

The greatest housing needs of the City now are the clearance and redevelopment of unhealthy and obsolescent areas and the repair of approximately 6,000 houses to prevent their premature demolition. The freezing of rents at an uneconomic level increases the difficulties with regard to the repair of houses.

As in previous annual reports information concerning the types of inspections made, the measures taken to supervise food supplies, and the many other varied duties, is given in the body of the report.

I would again like to express my appreciation of the sympathetic and co-operative spirit shown by your Committee throughout the year.

It is also a pleasure to again place on record the team spirit shown, and the loyal and willing co-operation of the staff of the Department.

I am,

Yours faithfully,

F. SHAW,

Chief Public Health Inspector.

WORK OF PUBLIC HEALTH INSPECTORS



Closest Accommodation at the end of 1955

Privy Middens—No. of middens, 1. No. of closets attached to these middens, 1. No. of pail closets, 4. No. of dry ashpits, 6. No. of movable ashbins, 15,000. No. of houses on water carriage system, 14,301. No. of fresh water closets, 18,427. No. of waste water closets, nil. Conversions during 1955, nil.

Sanitary Inspections during 1955

No. of premises visited, 12,920. Defects or nuisances—No. discovered, 816 ; No. abated, 954. No. of notices served—Informal, 960 ; Statutory, 179. Legal proceedings, 3.

Types of Inspections and Visits other than Housing

Atmospheric pollution	...	...	...	...	...	...	279
Rodent or insect pest infestation	...	...	...	...	...	...	63
Infectious disease enquiries	...	...	...	...	...	...	23
Food inspection	...	...	...	...	...	...	212
Miscellaneous Public Health inspections	...	...	...	...	...	...	539
Miscellaneous visits	...	...	...	...	...	...	1,637
Offensive trade premises	...	...	...	...	...	...	20
Butchers' shops and stores	...	...	...	...	...	...	76
Bakehouses	...	...	...	...	...	...	155
Ice cream premises	...	...	...	...	...	...	146
Fish fryers' premises	...	...	...	...	...	...	100
Food preparing premises	...	...	...	...	...	...	111
Other food premises, general	...	...	...	...	...	...	64
Dairies	...	...	...	...	...	...	41
Public Houses	...	...	...	...	...	...	13
Markets	...	...	...	...	...	...	6
Restaurants	...	...	...	...	...	...	113
Shops (Shops Act)	...	...	...	...	...	...	85
Theatres, cinemas, etc.	...	...	...	...	...	...	46
Slaughterhouses	...	...	...	...	...	...	757
Snack bars, soda fountains, etc.	...	...	...	...	...	...	100
Pet shops	...	...	...	...	...	...	7
Combustion plants	...	...	...	...	...	...	9
Work places	...	...	...	...	...	...	20
Food vans	...	...	...	...	...	...	177
Schools Meals Service	...	...	...	...	...	...	50
Canteens	...	...	...	...	...	...	23

Complaints Received

<i>Nature of Complaint</i>								<i>Number</i>
General defects	...	...	...	...	...	...	...	31
Defective fireplaces	...	...	...	...	...	...	...	15
Defective rainwater pipes	...	...	...	...	...	...	...	13
Defective windows	...	...	...	...	...	...	...	11
Defective chimneys	...	...	...	...	...	...	...	15
Defective doors	...	...	...	...	...	...	...	8
Defective plasterwork	...	...	...	...	...	...	...	6
Defective eavesgutters	...	...	...	...	...	...	...	18
Defective roofs	...	...	...	...	...	...	...	30
Defective sinks	...	...	...	...	...	...	...	5
Defective ceilings	...	...	...	...	...	...	...	4
Defective walls	...	...	...	...	...	...	...	4
Defective waterclosets	...	...	...	...	...	...	...	27
Choked waterclosets	...	...	...	...	...	...	...	17
Burst water pipes	...	...	...	...	...	...	...	11
Dampness	...	...	...	...	...	...	...	33
Choked drains	...	...	...	...	...	...	...	77
Flooding	...	...	...	...	...	...	...	36
Defective dustbins	...	...	...	...	...	...	...	17
Accumulations of refuse	...	...	...	...	...	...	...	16
Dirty premises	...	...	...	...	...	...	...	16
Vermin	...	...	...	...	...	...	...	11
Rats	...	...	...	...	...	...	...	44
Mice	...	...	...	...	...	...	...	59
Insect pests	...	...	...	...	...	...	...	37
Foul and obnoxious odours	...	...	...	...	...	...	...	16
Dangerous buildings	...	...	...	...	...	...	...	3
Smoke nuisances	...	...	...	...	...	...	...	13
Overcrowding	...	...	...	...	...	...	...	56
Nuisances from animals	...	...	...	...	...	...	...	6
Miscellaneous	...	...	...	...	...	...	...	56
								<hr/> 711 <hr/>

**Improvements and Repairs Effected
Following Action by the Public Health Inspectors
Improvements on Registered Premises**

Factories	...	...	...	...	...	...	...	...	17
Shops	...	...	...	...	...	...	...	...	5
Dairies	...	...	...	...	...	...	...	...	2
Combustion plants	...	...	...	...	...	...	...	...	2
Public Houses	...	...	...	...	...	...	...	...	—
Miscellaneous	...	...	...	...	...	...	...	...	3
Food vans	...	...	...	...	...	...	...	...	2
Places of entertainment	...	...	...	...	...	...	...	...	3

Food Premises

Walls and ceilings decorated	...	...	...	...	...	...	...	67
Washbasins provided	...	...	...	...	...	...	...	7
Hot water service provided	...	...	...	...	...	...	...	10
New equipment provided	...	...	...	...	...	...	...	7
Sinks provided	...	...	...	...	...	...	...	4
New floors laid	...	...	...	...	...	...	...	3
Improved ventilation provided	...	...	...	...	...	...	...	3
Improved lighting provided	...	...	...	...	...	...	...	1
Extensions to food premises	...	...	...	...	...	...	...	2
Miscellaneous	...	...	...	...	...	...	...	4

Drainage, Sanitary Accommodation, etc.

Drains cleared from obstruction	...	...	...	...	...	...	...	58
Public sewers cleared from obstruction	...	...	...	...	...	...	...	55
Drains re-laid or repaired	...	...	...	...	...	...	...	34
Sewers re-laid or repaired	...	...	...	...	...	...	...	5
Soil pipes, waste pipes, etc., repaired or renewed	...	...	...	...	...	...	...	12

Water Closets

Additional W.C.s provided in factories	...	...	...	...	...	...	...	1
W.C. compartments re-built or repaired	...	...	...	...	...	...	...	11
W.C. basins renewed	...	...	...	...	...	...	...	23
W.C. cisterns renewed or repaired	...	...	...	...	...	...	...	6

Various

Offensive accumulations removed	...	...	...	...	...	...	...	9
Additional dustbins provided	...	...	...	...	...	...	...	5
Dustbins renewed	...	...	...	...	...	...	...	25
Miscellaneous	...	...	...	...	...	...	...	29
Nuisances from animals abated	...	...	...	...	...	...	...	1

Execution of Work by City Council in Default of Persons upon whom Notices were Served

In 3 instances during the year the City Health Department was called upon to execute works in the default of persons upon whom statutory notices had been served. In all cases the City Council made orders for the collection of rents until such times as the costs will be recovered. The works carried out, with the costs, were as follows :—

<i>Address</i>	<i>Work</i>	<i>Cost</i>		
		£	s.	d.
49, Bulk Road ...	Remedy of various defects ...	16	8	0
41, Avondale Road ...	Remedy of various defects ...	12	1	3
41, Avondale Road ...	Provision of new dustbin ...	1	14	10

Shops (Shops Act, 1950, Section 38)

There are in the City about 900 shop premises of all descriptions. Many of them are one-man businesses. 85 of those where assistants are employed were inspected during the course of the year.

Offices

Apart from offices attached to factories it was not found possible during the year, because of the pressure of other duties, to make any general inspection of office accommodation.

Camping Sites (other than Military)

Although no camping sites were licensed during the year the inspectors made 41 visits to sites which were either used for periods less than 42 consecutive days or were in use illegally.

Measures taken to deal with Air Pollution

The measures taken during the year to deal with air pollution from combustion plants were :—

- (a) The observation of factory chimneys ;
- (b) inspection of combustion plants for the purpose of ascertaining the causes of smoke nuisances and to give advice ; and subsequent visits ;
- (c) the measurement of the degree of atmospheric pollution in the City.

(a) Observations

During the year your Public Health Inspectors made 119 observations of factory, etc., chimneys. The total time spent on these observa-

tions was $59\frac{1}{2}$ hours. Of this time the periods during which the various shades of smoke were emitted are shown in the following tables.

*Length of time, in minutes, during which Observations
when smoke was emitted from chimneys*

Black	Grey	Little or no smoke	Total
65	$1919\frac{1}{2}$	$1585\frac{1}{2}$	3570

The number of smoke nuisances recorded and action taken were as follows :—

Nuisances Recorded	Verbal Warnings given	Written Notices sent
6	2	4

(b) Inspections and Visits

Five inspections of combustion plants were made during the year and 4 follow-up visits.

(c) Measurement of Air Pollution

Three standard deposit gauges, 3 lead peroxide instruments, and a smoke filter are stationed within the City.

The deposit gauges are used to measure deposits of ash, grit, and other solid particles which, because of their relatively large size, fall fairly quickly to the ground. The lead peroxide instruments are used to calculate the amount of sulphur dioxide present in the atmosphere. Most of the sulphur dioxide present in the atmosphere has been emitted from chimneys as a gas.

The smoke filter is an apparatus for measuring the daily average concentration of smoke. Air is drawn continuously through a filter paper by a small suction pump which is operated by electricity. The filter paper is changed daily and the area on which the sample is collected is circular and of between $\frac{1}{2}$ in. and 2 in. in diameter according to the situation of the apparatus, the time of the year, and the volume of air sampled.

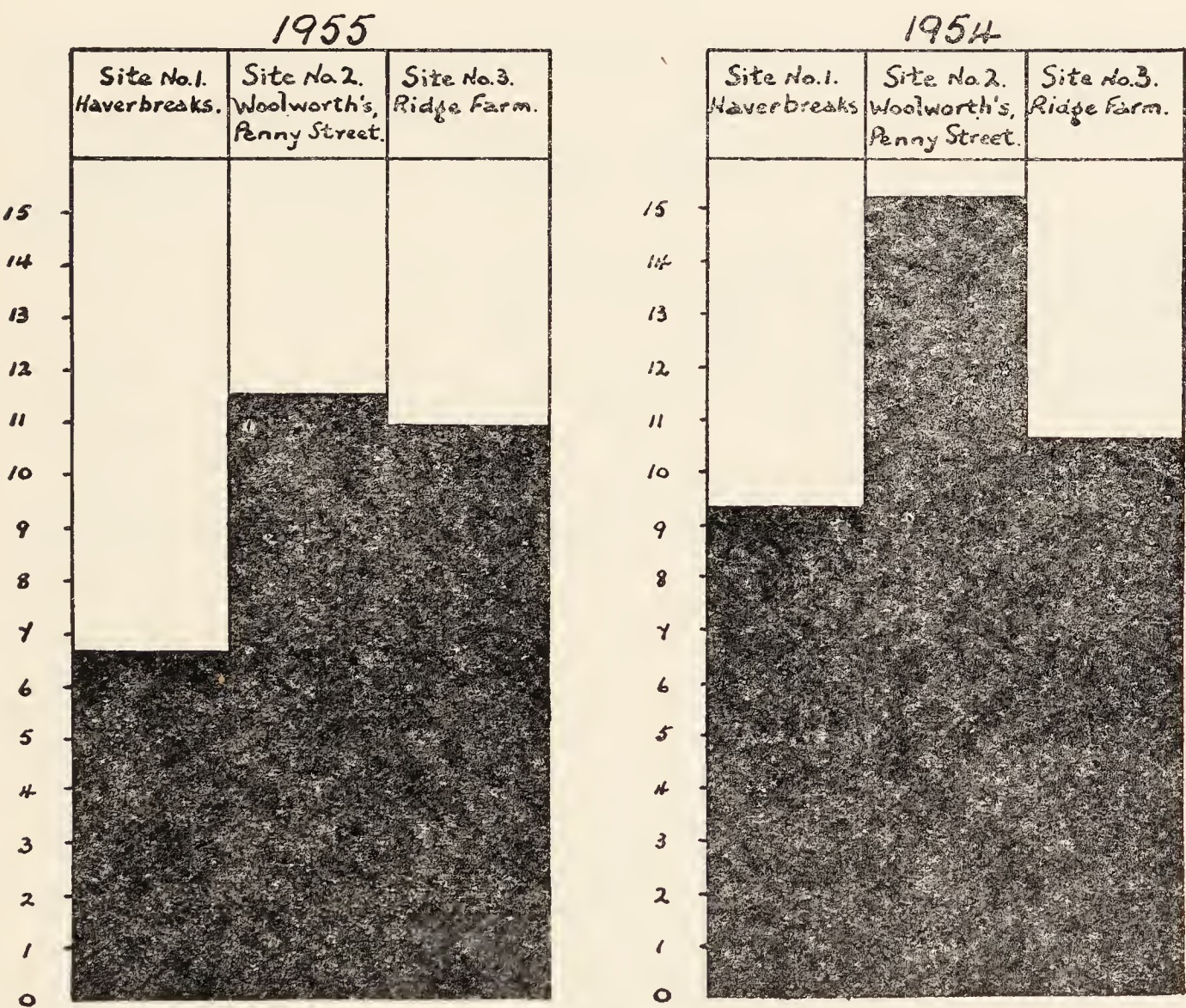
The total deposited matter calculated in tons per square mile per month from the standard deposit gauges, and the amount of sulphur dioxide in parts per 100 million parts of air, as calculated from the volumetric instruments attached to the smoke filter, are given in Table 1 below.

TABLE I.

Month	TOTAL DEPOSITED MATTER (SOOT) Tons per square mile			SULPHUR DIOXIDE parts per 100 mil. parts of air Monthly Average Public Health Offices
	Site No. 1 Haverbreaks	Site No. 2 Penny Street Woolworths	Site No. 3 Ridge Farm	
January	4.69	9.76	6.42	9.2
February	3.75	9.05	5.65	7.4
March	6.68	12.90	11.76	4.5
April	6.28	11.68	7.85	3.4
May	4.59	12.26	9.14	1.4
June	8.54	9.93	14.18	1.6
July	6.96	6.62	18.59	2.9
August	6.35	8.95	10.33	3.0
September	7.33	11.01	12.07	3.4
October	9.29	14.86	16.09	6.4
November	7.03	10.77	8.35	8.9
December		21.23	12.96	7.1

TABLE II.

Average monthly deposit of soot in Lancaster in tons per square mile.



Offensive Trades

Number of premises—5.

Types of offensive trades :—

Fellmongers	...	...	...	...	...	...	...	1
Gut Scrapers	...	...	...	...	...	...	...	2
Rag and Bone Dealer	...	...	...	...	...	...	...	1
Tripe Boiler	...	...	...	...	...	...	...	1

All the offensive trades in the City were, generally speaking, carried on during the year without serious nuisance in spite of difficulties due to obsolete buildings.

Factories Act, 1937

Details of the number of inspections made by the Public Health Inspectors and of the number and type of contraventions found are given in the following tables :—

INSPECTIONS				
Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
Without mechanical power	34	13	—	—
With mechanical power	202	73	4	—
Other premises ...	5	1	—	—
Total	241	87	4	—

DEFECTS FOUND

	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of Cleanliness (S.1)	2	—	—	—	—
Overcrowding (S.2) .	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7):—					
(a) Insufficient ..	—	2	—	—	—
(b) Unsuitable or defective ...	11	21	—	4	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences ...	—	—	—	—	—
Total ...	13	23	—	4	—

Common Lodging Houses

There are no common lodging houses in the City.

Houses Let in Lodgings

There are approximately 850 houses in the City which are either occupied by more than one family or are used for accommodating lodgers.

Amongst the latter are a few premises where accommodation is provided for transport drivers and similar persons.

Many of the houses now accommodating more than one family are no longer suitable for single family occupation, and yet their structures are sound. Better use could be made of these premises if either the City Council or private owners were to convert them into separate flats, if practicable, or properly equipped dwelling units where this is not the case. Unless something of this nature is done districts containing these houses deteriorate rapidly. The City Council would be well advised to consider the acquisition of this type of property with a view to conversion or adaptation. Such a programme would arrest the rapid decay now taking place in districts which a decade or so ago were classified as "select residential," and raise general housing standards in the City. Some of the worst living conditions are to be found in houses occupied by more than one family. From the sociological and aesthetical points of view alone there is a strong case for taking vigorous action to deal with the slums that exist behind solid stone bay windows.

Tents, Vans, Sheds, etc.

There are no tents, vans, or similar erections used at present for human habitation in the City.

Underground Sleeping Rooms

There are in the City 5 houses where the basements, the floors of which are 3 feet or more below ground level, are used as sleeping rooms. All these basements are unfit for human habitation and consequently, as our slum clearance programme proceeds, it will be necessary to make Closing Orders in respect of these basements, and thus prohibit their use as dwellings whilst they remain unfit.

Rag Flock and Other Filling Materials Act, 1951

Rag Flock Acts, 1911 and 1928

No. of premises in the district in which filling materials are manu- factured, used, or sold	4
No. of Inspections	4
No. of samples taken	2

Both samples satisfied the prescribed tests for cleanliness, etc.

HOUSING CONDITIONS

General Observations

The greatest housing needs of the City now are the clearance and redevelopment of unhealthy and obsolescent areas and the repair and improvement of approximately 6,000 houses which are considered to have a further life of at least 15 years. Sufficient progress in meeting the net shortage of houses which existed in 1945 has been made to justify the resources which are available for raising housing standards generally in the City to be used largely, if not entirely, to replace slums and remove congestion, squalor, and ugliness.

The squalor, decay and congestion in the City is a challenge to civic pride and man's ability to control, in some degree, his physical environment. A programme to deal with unfit houses and for redevelopment was outlined in my Second Housing Report made in June, 1955.

The removal of slums and redevelopment will call for the erection of 600 dwellings within the next five years. By building at greater densities than hitherto, for a long time, we have been accustomed to in Lancaster, and by concentrating on the erection of blocks of flats, some, perhaps, multi-storey, it ought to be possible to provide these dwellings on the land at present occupied by the slum houses, and still permit wider streets and more natural light and ventilation to the new dwellings than is possessed by the old. Such a scheme will further the national policy of conserving land for food production. The case for the immediate redevelopment of certain areas in the City is overwhelming.

Although the number of applicants on the list for Corporation houses at 31st December, 1955, was 1,392, the real net shortage of dwellings, i.e. exclusive of those needed to replace unfit houses, must be considerably less than this number. At 31st December, 1955, only 3 houses in the City were overcrowded. The only reliable method of assessing housing

need is by way of a survey, and sound economy requires there should be a reliable assessment of housing need. The first five years slum clearance programme should be well advanced by 1958, and by this time thought will need to be given to future housing programmes. A further comprehensive housing survey as was made during 1947-48 should therefore be made during 1958-59.

The task of ensuring the proper repair of 6,000 houses in the City is a big one. It is complicated by the freezing of rents at an uneconomic level. Such a policy encourages owners to neglect their property until the houses are not repairable at reasonable cost, or the tenants are driven by the condition of the houses either to buy them and repair them, or else to buy another house and leave the landlord to sell the existing one with vacant possession. In the last resort the City Council is faced with the task of either making demolition or closing orders and providing new houses at relatively high cost or acquiring these houses at site value and repairing them. If the last method is adopted the City Council can charge a higher rent, if it wishes, than could the present landlord, had he repaired the house.

Although it is in the national interest that all mendable houses should be kept in good repair, the local authorities have no legal powers to compel owners to keep their houses in a state of good maintenance.

This position is not always understood by members of local authorities and the public. Before a local authority can compel an owner to carry out repairs under the Housing Act, the house must have reached a state where it is totally unfit to be used for human habitation, and even then the only works a local authority can require an owner to execute are those necessary to bring the house up to a very humble standard whereby the house is no longer unfit. There is therefore a need for the strengthening of the law to permit local authorities to enforce a good repair or good maintenance standard. Good maintenance of houses should be a contractual obligation of all landlords implied in the letting and local authorities ought to be given the power to enforce such a contract. To make such a course equitable, however, there must be an early review of rent control.

The recent rating valuation has assessed all houses as nearly as possible according to their free market rentals in 1939, excluding the effects of extreme local shortage or abundance of accommodation. These assessments proportionately increased to allow for changes, e.g., devaluation of money, afford a ready made ceiling up to which controlled rents could be allowed to rise in stages, and subject to the issue of a certificate, by the local health department, that the house, at the time, is in good repair.

Houses without Internal Piped Supply of Water, etc.

(a) Number of houses which have not an adequate internal water supply	...	...	...	...	...	...	11
(b) Number of houses which have no separate water closet or other adequate sanitary accommodation	...	...	...	...	...	...	67

Information concerning the steps taken and the progress made in dealing with unsatisfactory housing conditions in the City during 1955 is given below :—

Inspection of Dwelling Houses

1.	Total number of dwellings inspected	...	...	...	...	602
2.	Total number of inspections made	...	...	...	...	916
3.	Number of houses inspected found to be unfit but capable of repair at reasonable cost	...	...	...	...	126
4.	Number of houses inspected and found not to be unfit but requiring repairs enforceable under the Public Health Act	...	...	...	...	137
5.	Number of houses inspected which were found to be unfit but were not capable of being made fit at reasonable cost	...	...	...	...	28
6.	Number of houses inspected which called for no further action	...	...	...	...	311

Notices Served

						<i>Informal</i>	<i>Formal</i>
7.	Notices under the Housing Acts requiring repairs to render houses fit for human habitation	...	...	...	...	79	57
8.	Notices requiring repairs, etc., under the Public Health Act	...	...	...	...	137	54
9.	Intimations to owners concerning lack of information in rent books	...	...	...	...	...	11

Result of Action

Repair of Houses

						<i>After Informal Notice</i>	<i>After Formal Notice</i>
10.	Houses made fit following the service of Housing Act notices	...	...	...	...	14	13
11.	Houses in which defects were remedied after the service of notices under the Public Health Act	...	...	...	...	113	136

Demolition and Closure of Dwellings

12.	Unfit houses demolished during the year	...	...	...	...	39
	Number of persons rehoused from these houses	...	...	...	...	147
13.	Houses closed during the year	...	...	...	...	2
	Number of persons rehoused from these houses	...	...	...	...	6
14.	Dwellings, which were parts of buildings, closed	...	...	...	...	2
	Number of persons rehoused from these dwellings	...	...	...	...	14

Repairs to Dwellings

Roofs repaired or stripped and renewed	...	...	...	...	60
External walls re-pointed	...	...	...	...	15
Rainwater pipes repaired or renewed	...	...	...	...	59
Eavesgutters repaired or renewed	...	...	...	...	90

Chimney stacks re-built	...	...	...	...	...	...	3
Yards, passages, pavements repaired or renewed	...	...	...	...	...	...	9
Ceilings re-plastered or repaired	...	...	...	...	...	...	13
Internal walls re-plastered or repaired	...	...	...	...	...	...	84
Windows repaired or renewed	...	...	...	...	...	...	69
Doors repaired or renewed	...	...	...	...	...	...	6
Floors repaired or renewed	...	...	...	...	...	...	17
Fireplaces repaired or renewed	...	...	...	...	...	...	17
Sinks renewed	...	...	...	...	...	...	2
Repairs to water supply systems	...	...	...	...	...	...	2
Miscellaneous	...	...	...	...	...	...	32

Houses Improved with the Help of Financial Grants

Total number of schemes submitted to the Council	...	...	...	...	...	45
Number of dwellings affected by the schemes	...	...	...	...	...	45
Number of schemes completed by the end of the year	...	...	...	...	...	40
Additional dwellings provided	...	...	...	...	...	1

New Dwellings Erected During the Year

					<i>Houses</i>	<i>Flats</i>
By the City Council	...	...	...	...	166	20
By private persons	...	...	...	...	42	Nil
			Total	...	208	20

Overcrowding

Housing Act, 1936. Part IV

At 31st December, 1955, only three families in the City were overcrowded. It is therefore a convenient point, in time, at which to review the progress made in this field of housing. The housing survey made in 1947-48 revealed, inter alia, that 129 families in the City were overcrowded. From time to time after the survey, new cases occurred. Some of these cases were due to natural increase and the remainder were either deliberate or due to ignorance of the law on the matter.

In the eight years that have elapsed since the issue of the Housing Report the Health Department has dealt with 382 cases of overcrowding. The ways in which the overcrowding was abated are shown in the table below :—

Abatement of Overcrowding, 1948-55

1. Cases rehoused by the City Council	...	...	...	...	205
2. Cases abated following warnings given by the Health Department	...	...	...	...	108
3. Cases abated following legal proceedings	...	...	...	...	4
4. Cases abated either by voluntary action on the part of the families concerned or by changed circumstances, e.g., a death in the family or a member leaving home for reasons of work	...	...	...	...	65
			Total	...	382

Between the 1st January, 1948, and the 31st December, 1955, the City Council built 843 new dwellings. In that period the City Council rehoused 205 overcrowded families so that an equivalent of 24.32% of new houses were allocated for the abatement of overcrowding.

Overcrowding Position during 1955

1.	Number of new cases reported during the year	...	...	14
2.	(a) Number of cases abated during the year	...	...	18
	(b) Number of persons concerned in (a) above	...	...	85
3.	Number of cases of overcrowding in Council houses which were abated during the year	...	...	2
4.	(a) Number of dwellings which remained overcrowded at the end of 1955	...	...	3
	(b) Number of families dwelling in these houses	...	...	3
	(c) Number of persons dwelling in these houses	...	...	17

There were no cases during the year in which houses became again overcrowded after the Council had taken steps for the abatement of overcrowding.

SANITARY CONDITIONS IN SCHOOLS

Routine inspections of all the schools situated in the City were made by the Public Health Inspectors during the year.

Information concerning the present sanitary, drinking, and washing arrangements, etc., in the schools is given in Table I below, and the improvements made during 1955 is given in Table II.

Total number of schools in the City	...	...	...	37
Number with fresh water closets only	...	...	...	34
Number with trough closets	...	...	...	3
Number with unsatisfactory yard surfaces	...	...	...	6
Number with inadequate washing facilities	...	...	...	24
Number with inadequate drinking facilities	...	...	...	1

Dallas Road Junior and Infants Schools	...	...	Lower playground re-surfaced
Willow Lane Nursery School	...		New refrigerator

PLACES OF ENTERTAINMENT

Forty-six inspections of places of public entertainment were made during the course of the year and a number of visits were made during performances in order to take thermometer readings and otherwise test the state of the air in the auditoriums. No conditions were recorded which would necessitate the City Council taking further action.

INSPECTION AND SUPERVISION OF FOOD

The administration of the Food and Drugs Acts, 1938-1950, and Milk and Dairies Regulations.

Milk Supply : Supervision and Distribution

During the year Public Health Inspectors made a total of 41 inspections of the 9 dairies situated in the City. It was found necessary on occasions to draw attention to contraventions of the Regulations or other unsatisfactory conditions.

The average daily consumption of milk per head of the population decreased slightly from 0.66 pints to 0.60 pints.

The proportion of pasteurised milk consumed in the City fell slightly from 75.3% in 1954 to 73.55% in 1955. The amount of sterilized milk increased from 2.48% in 1954 to 3.22% in 1955. This might be connected with the hot summer enjoyed in 1955 because sterilized milk normally keeps longer than pasteurised milk. The consumption of heat treated milk (i.e., pasteurised and sterilized) fell by 1% during 1955.

Average Daily Consumption of Milk

<i>Description</i>	<i>Daily Consumption in Gallons</i>	<i>Per centum of Whole</i>
Non-descript Raw Milk	117	3.12%
Tuberculin Tested Milk	757	20.13%
Pasteurised Milk	1,764	46.93%
T.T. (Pasteurised) Milk	1,000	26.60%
Sterilised Milk	121	3.22%
TOTAL	3,759	100.00%

Average daily consumption in pints per head of population ... 0.60 pints

Quantity of Milk Bottled (in gallons)

	<i>Amount bottled outside the City (in galls. per day)</i>	<i>Amount bottled in the City (in galls. per day)</i>
Non-descript Raw Milk	117	—
Tuberculin Tested Milk	565	192
Pasteurised Milk	1119	645
T.T. (Pasteurised) Milk	333	667
Sterilised Milk	121	—
	2,255	1,504

Milk (Special Designation) (Raw Milk) Regulations, 1949
Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949

Information concerning the number of licences issued under the above-mentioned Regulations during 1955 is given below :—

Tuberculin Tested Milk : Bottling, 1. Dealers other than bottlers, 67.
 Pasteurised Milk : Pasteurising Plant, 1. Dealers, 62.
 Sterilised Milk : Dealers, 55.

Sampling of Milk for Bacteriological and Biological, etc., Tests

TESTS FOR TUBERCULOSIS MILK

Information concerning the number of samples and grades of milk submitted for biological tests for the presence of tubercle bacilli and the results of the tests is given in the following table.

	Nondescript Raw Milk	Tuberculin Tested Milk
Total Number Taken	8	44
Number Negative	8	39
Number Positive	—	—
No Result	—	5
Percentage Positive	—	—

Sampling of Milk for Good Keeping Quality and for Evidence of Adequate Pasteurisation or Sterilisation

Information concerning the testing of milk for good keeping quality and for adequate heat treatment is given in the following tables.

SAMPLES OF MILK TAKEN FOR METHYLENE BLUE AND B.COLI TESTS

	Raw Milk Nondescript	Tested Milk. Tuberculin	Pasteurised Milk.	Tuberculin Tested (Pasteurised)
Total Number Taken	8	44	38	13
Number Satisfactory	6	33	38	13
Number Unsatisfactory	2	11	—	—
Percent. Unsatisfactory	25.00%	25.00%	—	—

SAMPLES OF MILK TAKEN FOR PHOSPHATASE TEST

	Pasteurised Milk.	Tuberculin Tested (Pasteurised) Milk.
Total Number Taken	38	13
Number Satisfactory	38	13
Number Unsatisfactory	—	—
Percentage Unsatisfactory	—	—

SAMPLES OF MILK TAKEN FOR BRUCELLA ABORTUS TESTS

	Nondescript Raw Milk	Tuberculin Tested Milk
Total Number Taken	8	75
Number Satisfactory	8	62
No. Positive Whey Agglutination Test	—	6
Percent. Pos. Whey Agglutination Test	—	8.00%
No Test done	—	7

All the samples found to be positive for Brucella Abortus related to one incident. Five out of the six positive samples were follow-up samples in order to isolate the particular animals. This was done and the milk from the cows was heat treated for the remainder of the lactation period. At the end of this period two of the affected animals were slaughtered and the third was sold to a dealer.

SAMPLES OF STERILISED MILK TAKEN FOR TURBIDITY TEST

Number taken : 9. Results all satisfactory.

Observations on Results of Tests

The percentage of samples of tuberculin tested raw milk which failed to pass the good keeping quality test (methylene blue) increased from 19% in 1954 to 25% in 1955. In 1953 12.2% of samples failed the test, which tends to show there has been a continued fall in the keeping quality of tuberculin tested raw milk during the last few years.

It is pleasing to be able to report, however, that all samples of pasteurised milk submitted for the phosphatase test were found to be satisfactory.

Bacteriological and Chemical Examination of Ice Cream

Bacteriological Examination

Out of 27 samples of ice cream taken for bacteriological examination 22 were placed in Grades 1 and 2 indicating they were satisfactory. None of the samples were found to contain B.Coli.

BACTERIOLOGICAL EXAMINATION

No. of Samples Taken	Methylene Blue Decolourisation Test		B. Coli		Ministry of Health Provisional Grades			
	Satisfactory	Unsatisfactory	Absent Satisfactory	Present Unsatisfactory	1	2	3	4
27	22	5	27	—	18	4	3	2

Chemical Examination

No sample of ice cream sent for analysis contained less than the legal minimum of 5% fat. The majority of samples contained between 7.5% and 11%.

TABLE SHOWING FAT CONTENT

No. of Samples Taken	Under 5.0%	5.0% - 7.5%	7.5% - 10.0%	Over 10.0%
8	—	1	3	4

Bacteriological Examination of Foodstuffs in General

The following tables gives information concerning foods taken in routine sampling to ascertain whether the food had been prepared, handled, and stored under hygienic conditions. It will be seen that, although a fairly wide variety of foods were sampled, none was found to be unsatisfactory.

<i>Sample</i>					<i>Number Taken</i>	<i>Satis- factory</i>	<i>Not Satisfactory</i>
Shrimps	...	...	...	...	1	1	—
Brawn	...	...	...	...	5	5	—
Whey Cream	...	...	...	...	1	1	—
Cockles	...	...	...	...	2	2	—
Fish Paste	...	...	...	...	1	1	—
Fish Cakes	...	...	...	...	2	2	—
Potted Beef	...	...	...	...	1	1	—
Meat Pie	...	...	...	...	2	2	—
Pork Luncheon Meat	...	...	...	...	2	2	—
Cream Crisp	...	...	...	...	2	2	—
Meringue	...	...	...	...	1	1	—
Potted Salmon	...	...	...	...	1	1	—
Roast Pork	...	...	...	...	2	2	—
Cream Bun	...	...	...	...	1	1	—
Roast Ham	...	...	...	...	1	1	—
Boiled Ham	...	...	...	...	1	1	—
Artificial Cream Trifle	...	...	...	...	2	2	—
Tongue	...	...	...	...	1	1	—
Synthetic Cream	...	...	...	...	1	1	—
Jellied Veal	...	...	...	...	1	1	—
Cream Cake	...	...	...	...	1	1	—
Steak Pie	...	...	...	...	1	1	—
Liquid Egg	...	...	...	...	4	4	—
Liquid Egg, Frozen	...	...	...	...	3	3	—
Egg Albumin	...	...	...	...	1	1	—
Beef Paste	...	...	...	...	1	1	—
					—	—	—
					42	42	—
					—	—	—

Meat and Other Foods

The following are particulars of meat inspection carried out by your Public Health Inspectors during the year at the abattoir.

NUMBER OF ANIMALS SLAUGHTERED AND INSPECTED AT ABATTOIR

	Cattle excl'ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	1995	434	285	9973	9332
Number Inspected	1995	434	285	9973	9332
All Diseases Except Tuberculosis and Cysticerci:					
Whole carcasses condemned	3	20	13	40	19
Carcases of which some part or organ was condemned	983	203	—	414	477
Percentage of the number inspected affected with disease other than tuberculosis & cysti.	49.42 %	51.38 %	4.56 %	4.57 %	5.32 %
Tuberculosis only:					
Whole carcasses condemned	2	5	—	—	4
Carcases of which some part or organ was condemned	134	43	—	—	119
Percentage of number inspected affected with tuberculosis	6.82 %	11.06 %	—	—	1.31 %
Cystercercosis:					
Carcases of which some part or organ was condemned	6	—	—	—	—
Carcases submitted to treatment by refrigeration	6	—	—	—	—
Generalised & totally condemned	—	—	—	—	—

AMOUNT OF MEAT CONDEMNED BY WEIGHT

(a) For tuberculosis :	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Cattle	4	16	1	13
Calves	—	—	—	—
Sheep	—	—	—	—
Pigs	—	19	0	20
	5	15	2	5
	—	—	—	—
(b) For other conditions :	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Cattle	9	11	0	0
Calves	—	9	0	3
Sheep	1	6	3	9
Pigs	2	6	0	17
	13	13	0	1
	—	—	—	—

Particulars of Other Foodstuffs Condemned during 1955

Two hundred and twelve visits were made to food shops and stores for the purpose of examining food, and the following amounts of food were condemned as unfit for human consumption. In all cases but one, the food was voluntarily surrendered and the question of legal proceedings did not arise.

The remaining case concerned the delivery of bovine liver to a school meals kitchen. One liver was found to have tubercular lesions in the lymphatic gland and an abscess in the liver substance. A Magistrate's Order was obtained for its destruction. In addition, 144lbs. of bovine liver of the same consignment was found to be very cirrhotic due to parasitic infestation. It was deemed to be unsuitable for human consumption and destroyed. Successful legal proceedings were taken against the suppliers with respect to both incidents. Fines of £55 with £5 10s. 6d. costs were imposed.

Tinned Goods :	<i>Tins</i>	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Tinned Meat	409	1	1	1	10
Tinned Milk	151	—	1	0	25
Tinned Fish	56	—	—	2	0
Tinned Fruit	551	—	7	0	26
Tinned Vegetables ...	272	—	2	1	6
Tinned, Miscellaneous	30	—	—	2	22
	1,469	1	13	1	5

Other Condemned Foodstuffs :	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Bacon	—	—	—	4
Butter	—	—	—	13
Cake	—	—	2	26
Cheese	—	—	2	22
Fish, Fresh	—	2	0	0
Fish Cakes	—	—	—	5 ³ / ₄
Fruit, Fresh	—	9	3	10
Ham	—	—	1	21 ¹ / ₂
Jelly Crystals	—	—	—	4 ³ / ₄
Liver	—	1	1	20
Meat, Fresh	—	1	0	10 ¹ / ₂
Meat Potted	—	—	1	16
Mincemeat	—	—	—	5 ¹ / ₂
Moussè	—	—	—	13 ¹ / ₂
Mushrooms	—	—	—	3
Ox Tongues	—	1	2	19
Powder, Soup	—	—	—	2 ¹ / ₄
Prunes	—	—	2	19
Salad Cream	—	—	—	2
Sandwich Spread	—	—	—	1 ¹ / ₂
Sausages	—	—	1	15
Sweets	—	—	—	5 ³ / ₄
Vegetables, Dried ...	—	1	1	26
34 gallons Ice Cream Mix				
12 Chocolate Swiss Rolls				

Inspection of Food Premises

During the year the following number of inspections were made of the various food premises :—

Bakehouses	...	...	...	...	...	...	...	...	155
Butchers' Shops	...	...	...	...	...	...	...	...	76
Meat Stores, Abattoir, etc.	...	...	...	...	...	...	...	...	757
Fish Fryers	...	...	...	...	...	...	...	...	100
Restaurant Kitchens, etc.	...	...	...	...	...	...	...	...	113
Ice Cream premises	...	...	...	...	...	...	...	...	146
Market Stalls	...	...	...	...	...	...	...	...	6
Other food premises	...	...	...	...	...	...	...	...	64
Dairies	...	...	...	...	...	...	...	...	41
Snack Bars, etc.	..	...	...	...	...	...	...	...	100
Public Houses	...	...	...	...	...	...	...	...	13
Food preparing premises	...	...	...	...	...	...	...	...	111

General Observations on Food Premises

The table immediately above gives the number of inspections of each type of food premises made during 1955.

The fact that the Food Hygiene Regulations were being drafted caused many food traders in the City to mark time before making alterations to their premises. The Public Health Inspectors were also handicapped in giving information and advising improvement because of the pending alterations in the law. The new Food and Drugs Act and Food Hygiene Regulations both came into operation on the 1st January, 1956, and the latter is the most comprehensive code of law relating to food premises that we have so far had in this country. The next few years should see considerable improvement in the standard of premises and equipment used for handling food.

Public Abattoir

In spite of the fact that the layout, design, and structure of the abattoir is out of date, a few improvements were made during the year. Electric lights were provided in the piggery, the drainage system of the pig slaughterhouse was re-laid, and improved ventilation to the gut-scrappers' premises was provided.

A reasonable standard of hygiene was maintained throughout the year. There is, however, an urgent need for cooling facilities and especially for refrigeration. This need can, however, only be adequately dealt with when a new abattoir is built.

Market Hall

No improvements were made during the year. The coming into operation of the Food Hygiene Regulations make it imperative that there be no further delay in commencing reconstruction.

Sampling and Analysis of Food and Drugs for Adulteration, etc.

The following tables indicate the number and type of samples of food and drugs submitted for analysis during the year.

MILK

Number of Samples Taken	Number of poor quality (not adulterated)	Deficient Legal proceedings not considered warranted	Obviously Adulterated
Formal 86	13	2	—

Non-fatty

	Milk Fat	Solids	Water
Average for the year	3.63%	8.64%	87.73%
Legal minimum standards	3.00%	8.50%	88.50%

Analysis of Other Food and Drugs

Samples of the following foods were submitted for analysis during the year :—

Food or Drug	No. of Samples Taken	Not Genuine
Butter	1	—
Butter, Rum	1	—
Butter, Whey	1	—
Cheese Spread	1	—
Chicken, Minced	1	—
Cordial, Ginger	1	—
Cream, Salad	1	—
Cream, Whey	1	—
Curd, Lemon	3	3
(Vendor cautioned)		
Dripping	1	—
Flour, Coconut Cake	1	—
Flour, Self-raising	1	—
Gin	1	—
Jam	2	—
Jelly, Table	2	—
Lard	1	—
Margarine	5	—
Meat, Cooked	1	—
Milk, Condensed	1	—
Milk, Evaporated	1	—
Mincemeat	1	—

Orange Drink	...	...	...	...	...	1	—
Paste, Fish	...	...	...	...	...	1	—
Paste, Meat	...	...	...	...	...	1	—
Pepper, White	...	...	...	...	...	2	—
Powder, Custard	...	...	...	...	...	1	—
Salad, Fruit	...	...	...	...	...	1	—
Sauce	...	...	...	...	...	1	—
Sausages, Beef	...	...	...	...	...	5	1
(Vendor cautioned)							
Sausages, Pork	...	...	...	...	...	3	—
Sherry	...	...	...	...	...	1	—
Spice, Mixed Pickling	...	...	...	...	...	1	—
Suet, Beef	...	...	...	...	...	1	—
Sweets	...	...	...	...	...	3	—
Tea	...	...	...	...	...	2	—
Turkey, Minced	...	...	...	...	...	1	—
Vinegar, Malt	...	...	...	...	...	1	—
Whisky	...	...	...	...	...	1	—
Wine, Port Type	...	...	...	...	...	1	—
						—	—
						57	4
						—	—

WATER SUPPLY

Sources, Purification and Distribution

No alterations in the sources of supply of water were made during the year. The water, which is partly moorland surface water from the Council's own catchment area, and partly from Manchester's Thirlmere supply, is subjected to mechanical filtration and chlorination.

14,295 dwelling houses have an internal piped supply ; one block of 6 houses and another block of 3 houses rely on a common standpipe for each block. One house is supplied by a spring and 1 from a stream. These latter houses are situated in the rural part of the area, and it has not been reasonably practicable to provide a piped supply.

Sampling of Tap Water

Six samples of tap water from houses were submitted for analysis and 32 for bacteriological examination. The reports, abstracts of which are given in the following tables, indicate that the supply was satisfactory.

EXTRACTS FROM REPORTS ON CHEMICAL EXAMINATION OF TAP WATER

Test	28.2.55	28.2.55	28.2.55	20.7.55	20.7.55	20.7.55
Colour	Nil	Nil	Nil	Nil	Nil	Nil
Turbidity	Nil	Nil	Nil	Nil	Nil	Nil
Oxygen Absorbed	0.081	0.033	0.029	0.041	0.064	0.082
Free and Saline Ammonia	Nil	Nil	Nil	Nil	Nil	Nil
Albuminoid Ammonia	Nil	Nil	Under 0.001	Nil	Nil	Nil
Nitrous Nitrogen	Nil	Nil	Nil	Nil	Nil	Nil
Nitric Nitrogen	0.021	0.033	0.036	0.025	0.031	0.120
Chlorides	1.0	1.1	1.1	1.0	1.1	1.0
Hardness { Temporary	0.5	0.5	0.5	1.0	0.5	0.5
Clarke's { Permanent	2.0	2.5	2.0	3.0	3.0	2.5
Method { Total	2.5	3.0	2.5	4.0	3.5	3.0
Reaction, pH	7.0	6.8	6.6	8.4	7.4	7.2
Solids in Solution	8	9	16	5	4	12
Action on Lead	Under 0.01	Under 0.01	0.01	Under 0.01	Under 0.01	Under 0.01
Fluoride	0.03	0.05	0.05	0.03	0.5	0.05

EXTRACTS FROM REPORTS ON
BACTERIOLOGICAL EXAMINATION OF TAP WATER

Date	Aerobic micro organisms growing in yeastral agar	Probable No. of coliform organisms per 100 c.c. of water	Ward sample taken	Re- marks
	In 2 days at 37°C.			
27.1.55	2 Nil Nil	Nil Nil Nil	John o'Gaunt St. Annes Queens	
28.2.55	Nil 1 2	Nil Nil Nil	Scotforth Park Park	
19.4.55	Nil 1 Nil	Nil Nil Nil	St. Annes John o'Gaunt Queens	
16.5.55	Nil 1 16	Nil Nil Nil	Scotforth Park Skerton West	
15.6.55	Spreading growth 1 1	Nil Nil Nil	Park John o'Gaunt Scotforth	
20.7.55	1 Nil Nil	Nil Nil Nil	Scotforth Scotforth Skerton West	
22.8.55	Nil Nil Nil	Nil Nil Nil	Scotforth John o'Gaunt Skerton West	
27.9.55	Nil Nil 66	1 Nil Nil	John o'Gaunt Park John o'Gaunt	
5.10.55	Nil Nil	Nil Nil	Park Park	
23.11.55	2 1 Nil	Nil Nil Nil	Scotforth John o'Gaunt Skerton West	
12.12.55	Nil 108 1	Nil Nil Nil	Queens John o'Gaunt Skerton West	

BACTERIOLOGICAL EXAMINATION OF SWIMMING BATH WATER

Twenty samples of swimming bath water were submitted for bacteriological examination and extracts from the reports are given below :—

Date	Aerobic micro-organisms growing in yeastral agar	Prob. No. of coliform organisms per 100 c.c. of water	Bath from which sample was taken	Re- marks
	2 days at 37°C.			
26.1.55	Nil	Nil	Corp'n Minor Plunge	
28.2.55	4	Nil	Corp'n Minor Plunge	
19.4.55	4.500 Nil	50 Nil	Corp'n Major Plunge Corp'n Minor Plunge	
16.5.55	2 5 1	Nil Nil Nil	Corp'n Minor Plunge Corp'n Major Plunge L.R.G.S.	
7.6.55	1	Nil	L.R.G.S.	
15.6.55	480 4	Nil Nil	Corp'n Minor Plunge Corp'n Major Plunge	
28.6.55	752 Nil Nil	Nil Nil Nil	Corp'n Minor Plunge Corp'n Major Plunge L.R.G.S.	
20.7.55	Spread'g growth Spread'g growth Spread'g growth	Nil Nil Nil	Corp'n Minor Plunge Corp'n Major Plunge L.R.G.S.	
22.8.55	Nil	Nil	Corp'n Major Plunge	
28.9.55	2 Nil	1 1	Corp'n Minor Plunge Corp'n Major Plunge	
23.11.55	Nil	Nil	Corp'n Minor Plunge	
12.12.55	1	Nil	Corp'n Minor Plunge	

Prevention of Damage by Pests Act, 1949

Details of the premises visited, number found to be infested, and information concerning treatment are given in the following tables :—

SURFACE TREATMENT

	TYPE OF PROPERTY				Agri- cultural (5)
	Non-Agricultural				
	Local Au- thority (1)	Dwlng. Houses (inclgd. Council Houses) (2)	All Other (inclgd. Business P'mises) (3)	Total of Cols (1), (2) & (3) (4)	
I. Number of properties in Local Authority's District	22	13732	2569	16323	41
II. Number of properties ins- pected as result of:					
(a) Notification	2	59	63	124	—
(b) Survey under the Act	28	2	750	780	23
(c) Otherwise (e.g. when vis- ited primarily for some other purpose)	—	—	—	—	—
III. Total inspections carried out —including re-inspections	116	564	1079	2389	26
IV. Number of properties ins- pected (in Sect. II) which were found to be infested by:					
(a) Rats { Major	—	—	3	3	—
Minor	3	15	27	45	—
(b) Mice { Major	1	—	16	17	—
Minor	1	36	52	89	—
V. Number of infested proper- ties (in Sect IV treated by Local Authority	5	51	98	154	—
IV. Total treatments carried out —including re-treatments	5	51	98	154	—
VII. Number of notices served under Sect. 4 of the Act.:					
(a) Treatment	—	—	—	—	—
(b) Structural Work (i.e. proofing	—	—	—	—	—
VIII. Number of cases in which default action was taken fol- lowing the issue of a notice under Sect. 4 of the Act	—	—	—	—	—
IX. Legal proceedings	—	—	—	—	—
X. Number of "block" control schemes carried out	—	—	—	—	—

SEWER TREATMENT

Total number of manholes in the City : 1,439.

Treatment Number : No. 7, No. 8.

Dates of Treatment : No. 7, 9-12-54 to 30-4-55 ; No. 8, 18-7-55 to 14-10-55.

Bait bases and poison used : No. 7, Sausage Rusk and Zinc Phosphide ; No. 8, Bread Mash and Arsenious Oxide.

Number of manholes baited : No. 7, 487 ; No. 8, 577.

Number of manholes showing prebait take : No. 7, 125 ; No. 8, 186.

Number of manholes showing complete prebait take (on one or both days) : No. 7, 101 ; No. 8, 163.

Scheme of baiting used (e.g. consecutive days, or 1st, 3rd, and 5th days) : Consecutive.

Test baiting : Number of manholes tested—No. 7, Nil ; No. 8, 143.

Number of tested manholes showing bait take—No. 7,
Nil ; No. 8, 2.

Disinfection and Disinfestation of Premises, etc.

Information concerning the disinfection and disinfestation of premises and articles carried out during the year is given in the following

DISINFECTION (PREMISES)

Premises Disinfected.			Single Rooms Disinfected.		
No. of Whole Houses.	No. of Ships.	No. of other Premises	In Houses.	In Ships.	In other Premises.
19	Nil	Nil	27	Nil	Nil

DISINFECTION (BOOKS AND OTHER ARTICLES)

Books Disinfected.		Other Articles.	Articles Destroyed.	
Public Library.	Private Library.		Books.	Other Articles.
227	Nil	22 beds	Nil	18

Insect Pest Control

Twenty-five houses, 10 Council owned and 15 others, 20 other premises and 4 single rooms were disinfested by means of liquid insecticides, and 169 vans of furniture were fumigated with HCN during rehousing operations. Fuller information is given in the table below.

Type of premises treated	Type of Infestation.					Single Rooms
	Bugs	Fleas	Ants	Cock-eroaches	Others	
Corporation Houses	—	6 36 rooms	1 4 rooms	3 5 rooms	—	1
Other Houses	5 14 rooms	3 8 rooms	3 30001 01	2 7 rooms	2 11 rooms	2
Other Premises	—	—	7 29 rooms	13 200 r'ms	—	1
Totals	5 14 rooms	9 44 rooms	11 43 rooms	18 212 r'ms	2 11 rooms	4

LEGAL PROCEEDINGS

Acts, Byelaws or Regulations under which proceedings were instituted	Offence	Result	Fine	Costs
Public Health Act, 1936, Sec. 93	Various defects in house	Nuisance Orders made	—	—
Public Health Act, 1936, Sec. 93	Various defects in house		—	—
Public Health Act, 1936, Sec. 93	Various defects in house		—	—
Food and Drugs Act	Selling meat unfit Selling liver not of quality demanded	Conviction Conviction	£40 £15	} £5.10.

SECTION “ E ”

PORT HEALTH

LANCASTER PORT HEALTH AUTHORITY

The use of the port is mainly confined to a small amount of coastal traffic and similar cargo boats from the Continent. In view of this the more elaborate arrangements required in a larger port are not called for here.

Section I—Staff

Name of Officer	Nature of Appointment	Date of Appointment	Qualifications	Any other appointments held
Robert W. Farquhar	Port M.O.H.	1.7.52	B.Sc. (Agri.), M.B., Ch.B., D.P.H.	Divisional M.O.H., Health Division No. 2 M.O.H., Carnforth U.D.C. M.O.H., City of Lancaster M.O.H., Lancaster R.D.C. M.O.H., Lunesdale R.D.C.
Frederick Shaw	Inspector to Port Health Authority	1.12.43	Cert. of R.S.I. & S.I. Joint Board; D.P.A.; M.R.S.H., A.M.I.P.H.E.	Chief Public Health Inspector, City of Lancaster

Section II

Amount of Shipping Entering the District During the Year

Ships from	Number	Registered Tonnage	Number Inspected		Number of Ships reported as having or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Public Health Inspector	
Foreign Ports	17	4171	—	9	Nil
Coastwise	35	6451	—	6	Nil
TOTAL	52	10632	—	15	Nil

Section III

Character of Shipping and Trade During the Year

Passenger Traffic	....	....	....	Number of passengers INWARDS	....	....	....	Nil
				Number of passengers OUTWARDS	....	....	....	Nil

Cargo Traffic	....	....	Principal IMPORTS	Linseed Oil, Veneers, Basic Slag, Waste Rags
			Principal EXPORTS	Furnace Coke, Breeze Dust.

Principal Ports from which ships arrive:—

Foreign....	....North Africa, Portugal, France, Holland
Coastwise	.... Clay Ports, Cornwall

Prevention of Damage by Pests Act, 1949

Prevention of Damage by Pests (Application to Shipping) Order, 1951

Number of Rodent Control Certificates issued — 18.

Result of Inspections—Action Taken by Port Health Inspector

Letter sent to owners of one vessel regarding unsatisfactory condition of crew's accommodation.

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